FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P96000074914 (8)

WESTMINSTER SALES CORPORATION

Country

Principal Place of Business 1149 PERIWINKLE WAY SAMBEL ISLAND FL 33957

Suite, Apt. #, etc.

City & State

21

2. Principal Place of Business

Mailing Address

2a. Mailing Address

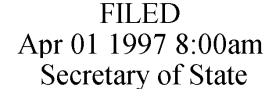
City & State

Suite, Apt. #, etc.

26

28

1149 PERIWINKLE WAY SANIBEL ISLAND FL 33957-4701





8. This corporation has liability for intangible tax under s. 199.032,

3. Date Incorporated or Qualified

5. Certificate of Status Desired

6. Election Campaign Financing

Trust Fund Contribution

09/09/1996

65-069220

4, FEI Number

3a. Date of Last Report

Applied For

\$8.75 Additional

Fee Regulred

\$5.00 May Be

Added to Fees

Not Applicable

241	[23]		<u></u>		riorida Statutes Espaca		
	9, Name and Address of Current Registered	d Agent		· · · · · · · · · · · · · · · · · · ·	10. Name and Address of New Registers	d Agent	
NA	UMANN, JOHN J]81	Name			
114	49 PERIWINKLE WAY		8:	Street	Address (P.O. Box Number is Not Acceptable)		
SA	NIBEL ISLAND FL 33957		١٠.	Ollege	Address (F.O. Box Northber is Not Acceptable)		
			8	3			
			ļ. <u></u>	<u> </u>		· · · · · · · · · · · · · · · · · · ·	
			84	City	2	E 85 Zip C	Code
11 Pursuar	nt to the provisions of Sections 607,0502 and 607.1	508 Florida Statuto	s the abo	/e-named			e registered
office o	r registered agent, or both, in the State of Florida. S I am familiar with, and accept the obligations of, Sec	uch change was at	uthorized b	y the cor	poration's board of directors. I hereby accept the a	ppointment as	registered
agent I	I am tamiliar with, and accept the obligations of, Sec	ction 607.0505, Flor	rida Statute) S.			
SIGNATURE	Signature typed or publed name of registered agont and title if app	louble (AlCYE)	Designated A	ant claust a	e required when reinstating) DATE		
12.	OFFICERS AND DIRECTOR		13.	gent signaturi	ADDITIONS/CHANGES TO OFFICERS A	-	P IN 12
71116	n Gracina And Director	X DELETE	1.1 TITLE		Director	Change	Addition
NAME	-PIATT- DOUGLAS-S	Em Occese	1.2 NAME			Committee of the commit	Last Pooliton
	ADDA METOO DIOMA OUTE A				John J. Naumann		
STREET ADORES:	FORT MYERS FL 33908		1.3 STREET ADDRESS		1149 Periwinkle Way		
CITY - \$1 - 7.5°	1 - AH-HISTONIA	DELETE	1.4 CITY -	ST-ZIP	Sanibel, FL 33957	Change	T Address
TITLE	1 -	TATI DECENE	21 TITLE		}	Lin Cuange	Addition
NAME	TEASTMAN, KELLI-		2.2 NAME		1		
STREET ADDRESS			2.3 STREE	T ADDRESS			
CHY-ST ZIF	-LEHIGH FL -83971-		2.4 CITY	-ST-ZIP			
TiTLE		DELETE	3.1 YITLE			Change	Addilion
NAME			3 2 NAME				
STREET ADDRESS	S		3.3 STREE	T ADDRESS	<u>{</u>		
CITY-ST-7IP			3.4. CITY	-ST-ZIP			
THLE	·	DELETE.	4.1 TITLE			Change	Addition
NAME			4. 2 NAM	Ē]		
STREET ADDRESS	S		4 3 STREE	T ADDRESS			
C(1Y - S1 - 7)P			4.4 CITY-	ST-ZIP			
TITLE		DELETE	5.1 TITLE			Change	Addition
NAME			5.2 NAME]		
STREET AUDRES	s		5 3 STREE	T ADDRESS			
CITY - ST - ZiP			5.4 CiTY -	ST~ZIP			
TILLE		DELETE	6.1 TITLE			Change	Addition
NAMí	`	•	6.2 NAME			_ ,	=
STREET ADVIRES	5			T ADDRESS			
C11Y - S1 - 7/2	~		6.4 CITY-				
14. Ldo her	reby certify that the info mall on supply with this fill	ing does not qualify	for the ex	emption s	L stated in Section 119 07(3)(i). Florida Statutes, Lifurl	her certify that	the
informa Lam an	ition indicated on this annual reput to Jupplementa a officer or director of the companion or the receiver	annual report is tru	ue and accorded to exe	curate and	stated in Section 119.07(3)(i), Florida Statutes. I furl d that my signature shall have the same legal effect report as required by Chapter 607, Florida Statutes	t as if made und	der oath; that