

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P98000036915

FILED
Jan 29, 2008
Secretary of State

Entity Name: WEST FIRST STREET ASSOCIATES, INC.

Current Principal Place of Business:

2037 WEST FIRST ST
FORT MYERS, FL 33901

New Principal Place of Business:

1821 VICTORIA AVE
FORT MYERS, FL 33901

Current Mailing Address:

2037 WEST FIRST ST
FORT MYERS, FL 33901

New Mailing Address:

1821 VICTORIA AVE
FORT MYERS, FL 33901

FEI Number: 65-0834360

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DOUGLAS, EDITH M
2037 W. FIRST ST.
FT MYERS, FL 33919 US

Name and Address of New Registered Agent:

DOUGLAS, EDITH M
1821 VICTORIA AVE
FT MYERS, FL 33901 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: EDITH M DOUGLAS

01/29/2008

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: DOUGLAS, DAVID L
Address: 15108 BRIAR RIDGE LN
City-St-Zip: FORT MYERS, FL 33912

Title: D () Delete
Name: DOUGLAS, EDITH M
Address: 15108 BRIAR RIDGE DR
City-St-Zip: FORT MYERS, FL 33912

Title: D () Delete
Name: LAFORCE, ROBERT
Address: 15108 BRIAR RIDGE LN
City-St-Zip: FORT MYERS, FL 33912

Title: D () Delete
Name: LAFORCE, ROBERT JR.
Address: 15108 BRIAR RIDGE LN
City-St-Zip: FORT MYERS, FL 33912

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: DOUGLAS, DAVID L
Address: 1821 VICTORIA AVE
City-St-Zip: FORT MYERS, FL 33901

Title: D (X) Change () Addition
Name: DOUGLAS, EDITH M
Address: 1821 VICTORIA AVE
City-St-Zip: FORT MYERS, FL 33901

Title: D (X) Change () Addition
Name: LAFORCE, ROBERT
Address: 1821 VICTORIA AVE
City-St-Zip: FORT MYERS, FL 33901

Title: D (X) Change () Addition
Name: LAFORCE, ROBERT JR.
Address: 1821 VICTORIA AVE
City-St-Zip: FORT MYERS, FL 33901

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: EDITH M DOUGLAS

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01/29/2008

Electronic Signature of Signing Officer or Director

Date