

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P98000036915

FILED  
Feb 02, 2009  
Secretary of State

Entity Name: WEST FIRST STREET ASSOCIATES, INC.

**Current Principal Place of Business:**

1821 VICTORIA AVE  
FORT MYERS, FL 33901

**New Principal Place of Business:**

**Current Mailing Address:**

1821 VICTORIA AVE  
FORT MYERS, FL 33901

**New Mailing Address:**

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  
1821 VICTORIA AVE  
FT MYERS, FL 33901      US

**Name and Address of New Registered Agent:**

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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

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

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

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

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

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title:      ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title:      ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title:      ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title:      ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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 DOUGLAS

\_\_\_\_\_ Electronic Signature of Signing Officer or Director

SEC

02/02/2009

\_\_\_\_\_ Date