## 2005 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P98000084896

Entity Name: WEST SUNRISE DEVELOPMENT CORP.

FILED Jan 31, 2005 Secretary of State

Current Principal Place of Business:	New Principal Place of Business:
Current Frincipal Flace Of Business.	New Fillicipal Flace Of Dusiliess.

6299 WEST SUNRISE BLVD. SUITE 211 SUNRISE, FL 33313

**New Mailing Address: Current Mailing Address:** 

6299 WEST SUNRISE BLVD. SUITE 211 SUNRISE, FL 33313

FEI Number: 65-0851614 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

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

GARDNER, IAN COHEN, BRYAN 6299 WEST SUNRISE BLVD. 6299 WEST SUNRISE BLVD. SUITE 211 SUITE 211 SUNRISE, FL 33313 US SUNRISE, FL 33313 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: BRYAN COHEN 01/31/2005

> Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

## **OFFICERS AND DIRECTORS:**

Name:

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: (X) Change ( ) Addition PSD ( ) Delete Title: PSD

TAYLOR, PAUL WOOD, WILLIAM Name: Name: 6299 WEST SUNRISE BLVD. 6299 WEST SUNRISE BLVD. Address: Address: City-St-Zip: SUNRISE, FL 33313 City-St-Zip: SUNRISE, FL 33313

Title: VPD ( ) Delete Title: VPD (X) Change ( ) Addition

GARDNER, IAN Name: Name: COHEN, BRYAN

6299 WEST SUNRISE BLVD. 6299 WEST SUNRISE BLVD. Address: Address: SUNRISE, FL 33313 SUNRISE, FL 33313 City-St-Zip: City-St-Zip:

Title: Title: CFO (X) Delete () Change () Addition

GARDNER, IAN Name: 6299 WEST SUNRISE BLVD. Address: Address: City-St-Zip: SUNRISE, FL 33313 City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutés. 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: BRYAN COHEN **VPD** 01/31/2005