

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# S41200

FILED
Jan 16, 2009
Secretary of State

Entity Name: WESTBURY OF PELICAN BAY, INC.

Current Principal Place of Business:

2200 GORDON DRIVE
NAPLES, FL 34102 US

New Principal Place of Business:

Current Mailing Address:

2200 GORDON DRIVE
NAPLES, FL 34102 US

New Mailing Address:

FEI Number: 65-0356362 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SEXTON, DAVID N MR.
1995 8TH STREET SOUTH
NAPLES, FL 34102 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: DV () Delete
Name: DEGROOTE, GARY W MR.
Address: 1455 LAKESHORE RD STE 201N
City-St-Zip: BURLINGTON, ON L7S2J1 CA

Title: DP () Delete
Name: DEGROOTE, MICHAEL H MR.
Address: 1111 INTERNATIONAL BLVD.
City-St-Zip: BURLINGTON, ON L7L6W1 CA

Title: DVS () Delete
Name: PEKARUK, JERRY MR.
Address: 1111 INTERNATIONAL BLVD.
City-St-Zip: BURLINGTON, ON L7L6W1 CA

Title: V () Delete
Name: SEXTON, DAVID N MR.
Address: 1995 8TH STREET SOUTH
City-St-Zip: NAPLES, FL 34102 US

Title: DV () Delete
Name: WATT, JAMES A MR.
Address: 11 VICTORIA STREET
City-St-Zip: HAMILTON HMEX BERMUDA, BE HMEX BE

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:

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: JERRY PEKARUK

_____ Electronic Signature of Signing Officer or Director

V

01/16/2009

_____ Date