

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# S59059

FILED
Mar 19, 2004
Secretary of State

Entity Name: WESTBURY PALISADES, 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

New Mailing Address:

FEI Number: 65-0406529

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BOND, SCHOENECA & KING P.A.
4001 TAMIAMI TRAIL NORTH
SUITE 250
NAPLES, FL 341033555 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: DP () Delete
Name: DEGROOTE, MICHAEL H.
Address: 1111 INTERNATIONAL BLVD.
City-St-Zip: BURLINGTON, ON L2L6W1

Title: DVS () Delete
Name: PEKARUK, JERRY
Address: 1111 INTERNATIONAL BLVD.
City-St-Zip: BURLINGTON, ON L2L6WL

Title: DV () Delete
Name: DEGROOTE, GARY W
Address: 1455 LAKESHORE RD. STE. 201N BURLINGTON
City-St-Zip: ONTARIO CANADA L7S2J1,

Title: VD () Delete
Name: MARTYN, ROBERT W
Address: 11 VICTORIA ST
City-St-Zip: HAMILTON HM EX BERMUDA,

Title: V () Delete
Name: SEXTON, DAVID N
Address: 4001 TAMIAMI TRAIL NORTH STE 250
City-St-Zip: NAPLES, FL 341033555

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 for the exemption stated in Section 119.07(3)(i), 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

V

03/19/2004

Electronic Signature of Signing Officer or Director

Date