

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

FILED
May 07 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # S76264 (8)

1. Corporation Name
WESTLANDS CORPORATION



Principal Place of Business 13812 SPOONBILL LANE SUITE 200 CLEARWATER FL 34622 US	Mailing Address 13812 SPOONBILL LANE SUITE 200 CLEARWATER FL 34622 US
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 21 8701 FOURTH ST. NORTH		2a. Mailing Address 26 8701 FOURTH ST. N.		3. Date Incorporated or Qualified 08/28/1991	
22 Suite, Apt. #, etc 303		27 Suite, Apt. #, etc 303		4. FEI Number 59-3081197	
23 City & State ST. PETERSBURG, FL.		28 City & State ST. PETERSBURG, FL.		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
24 Zip 33702		29 Zip 33702		6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees	
25 Country USA		30 Country USA		8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	

9. Name and Address of Current Registered Agent

COWEN, DIANA R.
 13812 SPOONBILL LANE
 CLEARWATER FL 34622

10. Name and Address of New Registered Agent

81 Name **COWEN, DIANA R.**
 82 Street Address (P.O. Box Number is Not Acceptable)
8701 FOURTH STREET NORTH
 83 **#303**
 84 City **ST. PETERSBURG** FL 85 Zip Code **33702**

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of Section 607.0505, Florida Statutes.

SIGNATURE *[Signature]* **PRESIDENT DIANA R. COWEN** 4/24/98
 (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS

TITLE	PD	<input type="checkbox"/> DELETE
NAME	COWEN, DIANA R.	
STREET ADDRESS	13812 SPOONBILL LANE	
CITY-ST-ZIP	CLEARWATER FL	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	PD	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	COWEN, DIANA R.	
1.3 STREET ADDRESS	8701 FOURTH STREET NORTH #303	
1.4 CITY-ST-ZIP	ST. PETERSBURG, FL. 33702	
2.1 TITLE	D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
2.2 NAME	GREGORIS, CONSTANTINE J.	
2.3 STREET ADDRESS	8701 FOURTH STREET NORTH #303	
2.4 CITY-ST-ZIP	ST. PETERSBURG, FL. 33702	

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or its receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or in an attachment with an address.

SIGNATURE: *[Signature]* **PRESIDENT. DIANA R. COWEN** 4/24/98 **S78-2277** (813)

CR2E034 (10/97)