## 2014 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F98000006481

Entity Name: URBAN WEST MANAGEMENT, INC.

**Current Principal Place of Business:** 

3161 MICHELSON DR SUITE 425 IRVINE, CA 92612

**Current Mailing Address:** 

400 N. ASHLEY DR., STE. 3010 TAMPA, FL 33602 US

FEI Number: 59-3308046 Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

LEMONS, DAWN 400 N ASHLEY DR. SUITE 3010 TAMPA, FL 33602 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:

Electronic Signature of Registered Agent Date

Officer/Director Detail:

Title PD Title VPST

Name BRAY, JOHN H Name BRAY, MATTHEW J

Address 400 N. ASHLEY DRIVE, SUITE 3010 Address 400 N. ASHLEY DRIVE, SUITE 3010

City-State-Zip: TAMPA FL 33602 City-State-Zip: TAMPA FL 33602

Title VP Title VPAS

Name SCHAFER, JOHN H Name TROUTMAN, JOHN C
Address 3161 MICHELSON DR Address 3161 MICHELSON DR

SUITE 425 SUITE 425

City-State-Zip: IRVINE CA 92612 City-State-Zip: IRVINE CA 92612

Title AVAS

Name LEMONS, DAWN M

Address 400 N ASHLEY DR., STE. 3010

City-State-Zip: TAMPA FL 33602

I hereby 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 all other like empowered.

SIGNATURE: DAWN M LEMONS AVAS

Electronic Signature of Signing Officer/Director Detail

AVAS 04/26/2014

Date

FILED Apr 26, 2014

**Secretary of State** 

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