

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 733574

1. Entity Name

WEST WIND ESTATES CONDOMINIUM ASSOCIATION, INC.

FILED
Apr 17, 2000 8:00 am
Secretary of State

04-17-2000 90034 018 ****61.25

Principal Place of Business

Mailing Address

K&K MGMT.
P.O. BOX 9692
NAPLES FL 34101
US

K&K MGMT.
P.O. BOX 9692
NAPLES FL 34101-9692
US

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

59-1647091

Applied For

Not Applicable

5. Certificate of Status Desired

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

KEN, WHELOCK
5860 18TH AVE. NW
NAPLES FL 34119

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. 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

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW:
FEE IS \$61.25

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

Make Check Payable to
Department of State

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

VD
PERRY, LAURENCE
195 OCEAN REEF LANE
NAPLES FL 34114

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

D
TRASK, JERRY
290 PINE KEY LANE
NAPLES FL 34114

TITLE ☒ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TD
PALARDY, YOLANDA
250 OCEAN REEF LN
NAPLES FL

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

PD
ROMANO, SHIRLEY
281 ISLANORADA LANE
NAPLES FL

TITLE ☒ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

SD
ALICE LITTLE
150 OCEAN REEF LANE
NAPLES FL

TITLE ☒ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

D
ELEAZER, JUANITA
240 LIME KEY LANE
NAPLES FL

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☒ Change ☒ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TD Audrey Denny
200 Islamorada Ln.
Naples, FL 34114

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☒ Change ☒ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

SD Yvonne Koolhaas
281 Ocean Reef Ln
Naples, FL 34114

TITLE ☒ Change ☒ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

D Ron Cook
180 Grass Key Ln
Naples, FL 34114

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 report or supplemental 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 the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Shirley Romano Shirley Romano 4-10-00 941 7745704

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (9/99)