NONPROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 738657

1. Corporation Name

WESTBURY "J" CONDOMINIUM ASSOCIATION, INC.

Principal Place of Business
ANGERMANN, JACK
171 WESTBURY J
DEERFIELD BEACH FL 33442

2. Principal Place of Business

Mailing Address

2a. Mailing Address

ANGERMANN. JACK 171 WESTBURY J DEERFIELD BEACH FL 33442

FILED Apr 14, 1999 8:00 am Secretary of State

04-14-1999 90163 001 14,638.75



3. Date Incorporated or Qualifed

21		26				04/13/19//											
Suite, Apt.	Suite, Apt. #, etc. Suite, Apt.					4. FEI Number		Applied For									
2		27				59-2062316	[_	Not Applicable									
City & Stat	te ·	City &	State			5. Certificate of Status Desired [\$8.7	5 Additional									
23		28				5. Certificate of Status Desired	Fee	Required									
Zip	Country Zip C			Country	Country 6. Election Campaign Financing \$5.00 May Be												
4 25 29 30				0		Trust Fund Contribution	Add	ed to Fees									
	9. Name and Address of Current	t Registered A	gent			10. Name and Address of New Reg	Istered Agent										
					Name												
CONDOM. OWNERS ORGAN. CENTURY VILLAGE EAST 3501 WEST DRIVE DEERFILED BEACH FL 33442-2085				82 Street Address (P.O. Box Number is Not Acceptable) 83													
													84	City	3	FL 85 Z	ip Code
									11. Pursuant	to the provisions of Sections 617 0502	2 and 617, 1508	3. Florida Statutes.	the above	-named corp	oration submits this statement for the pur	pose of changing	its registered
									office or r	registered agent, or both, in the State o	of Florida. Such	n change was auth	norized by	the corporation	n's board of directors. I hereby accept the	ie appointment a	s registered
agent. I a	m familiar with, and accept the obligation	ions of, Section	п 617.0503, гюла	a Statutes	•												
SIGNATURE	Signature, typed or printed name of registered agent	and title if applicable	- (NOTE: D	agistared Ager	t signature required	t when reinstation)	DATE										
12.	OFFICERS ANI			13.	it algricials required	ADDITIONS/CHANGES TO OFFICE		TORS IN 12									
TITLE	PD	<u> </u>	BELETE	1.1 TITLE			☐ Chan	ge Addition									
NAME	BREGER, HENRY		, 20	1.2 NAME			. –										
	,			1.3 STREET	ADDDEDO												
STREET ADDRESS	100 11001001					•											
CITY-ST-ZIP	DEERFIELD BCH FL		DELETE	1.4 CITY-S' 2.1 TITLE		IRECTOR	Chan	ge Addition									
TITLE	VPD		Z-OLLL IL			To The Mark	4										
NAME	OSTERLITZ,ROSE	٠,		2.2 NAME	P.	ONA DRAYMAN 3 WEST BURY J											
STREET ADDRESS	100			2.3 STREET	ADDRESS }	S WEST BURY D											
CITY-ST-ZIP	DEERFIELD BCH FL			2. 4 CITY-S	T-ZIP	DEFREIRI O RAGE SAUGE											
TITLE	S		☐ DELETE	3.1 TITLE			Chan	ge									
NAME	ROTHBERG, JACK			3.2 NAME													
STREET ADDRESS	168 WESTBURY J			3.3 STREET	ADDRESS		•										
CITY-ST-ZIP	DEERFIELD BEACH FL			3.4. CITY-5	T-ZIP			180									
TITLE	VPD		☐ DELETE	4.1 TTTLE		dame	☐ Chan	ge Addition									
NAME	STRASSMAN			4. 2 NAME		TRASIMAN, NATALIE	<u> 15</u>										
STREET ADDRESS	172 WESTBURY J			4.3 STREET	ADDRESS	** .											
CITY-ST-ZIP	DEERFIELD BCH FL			4.4 CITY-S	r-ZiP												
πιε	TD		☐ DELETE	5.1 TTLE		•	Chan	ge 🔲 Addition									
NAME	ANGERMAN, JACK	.s.		5.2 NAME	1	**											
STREET ADDRESS				5.3 STREET	ADDRESS												
CITY-ST-ZIP	DERRFIELD BCH FL 33442			5.4 CITY-S	r-zip		·										
	D		☐ DELETE	6.1 TTLE			☐ Chan	ge 🔲 Addition									
					1												
TITLE NAME	ļ			6.2 NAME	1												
NAME	GRABOWSKI, MARIA			6.2 NAME 6.3 STREET	ADDRESS												
	GRABOWSKI, MARIA						•										

• 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 the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or or an attachment with an address, with all other like empowered.

SIGNATURE

SNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

JAN. 5, 1999 954 428-2726

And the species of the second second