

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Sep 13, 2007 8:00 am
Secretary of State

09-13-2007 90001 043 ****61.25



DOCUMENT # 747231

1. Entity Name
WESTVIEW CONDOMINIUM ASSOCIATION NO. FOUR, INC.

Principal Place of Business
 15951 SW 41ST STREET
 #150
 DAVIE, FL 33331

Mailing Address
 15951 SW 41ST STREET
 #150
 DAVIE, FL 33331



2. Principal Place of Business - No P.O. Box #

3. Mailing Address

13460 SW 10th Street

13460 SW 10th Street

Suite, Apt. #, etc.

Suite, Apt. #, etc.

Suite 101

Suite 101

City & State

City & State

Pembroke Pines, FL

Pembroke Pines, FL

Zip

Country

Zip

Country

33027

US

33027

US

03292007 Chg-NP CR2E037 (12/06)

4. FEI Number
59-1995590

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

DAVIS, CHARLES W
 C/O PRIME MANAGEMENT
 13460 SW 10 ST., #101
 PEMBROKE PINES, FL 33027

Name **Sandy Demeo**

Street Address (P.O. Box Number is Not Acceptable)
9451 NW 14 Ct. #219



City **Pembroke Pines, FL** Zip Code **33024**

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Charles W. Davis

Reg. Agt.

4/4/07

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

(NOTE: Registered Agent signature required when reinstating)

DATE

Filing Fee is \$61.25 Due by May 1, 2007

9. Election Campaign Financing Trust Fund Contribution.

\$5.00 May Be Added to Fees

Make check payable to Florida Department of State

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE **PT** Delete
 NAME **DEMEO, SANDY**
 STREET ADDRESS **9451 NW 14 CT, #219**
 CITY-ST-ZIP **PEMBROKE PINES, FL 33024**

TITLE **President** Change Addition

TITLE **SD** Delete
 NAME **JUSTICE, DANIEL**
 STREET ADDRESS **9401 NW 14TH COURT**
 CITY-ST-ZIP **PEMBROKE PINES, FL 33024**

TITLE **5th Director** Change Addition

TITLE **D** Delete
 NAME **TARGIA, WARREN**
 STREET ADDRESS **1491 NW 95 TERR., #201**
 CITY-ST-ZIP **PEMBROKE PINES, FL 33024**

TITLE **VP** Change Addition

TITLE **S** Delete
 NAME **TRUEBA, VIVIANNE**
 STREET ADDRESS **1481 NE 94 AVE**
 CITY-ST-ZIP **PEMBROKE PINES, FL 33024**

TITLE Change Addition

TITLE **T** Delete
 NAME **ROJAS, WILLIAM**
 STREET ADDRESS **9471 NW 14 COURT**
 CITY-ST-ZIP **PEMBROKE PINES, FL 33024**

TITLE Change Addition

TITLE Delete

TITLE **Treasurer** Change Addition
 NAME **Robert Green**
 STREET ADDRESS **9491 NW 14th court #215**
 CITY-ST-ZIP **Pembroke Pines, FL 33024**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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 persons empowered.

SIGNATURE:

Sandra Demeo

4/4/07

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #