


2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 24, 2008 8:00 am
Secretary of State

04-24-2008 90121 025 ****61.25

DOCUMENT # 755511			
1. Entity Name WESTGATE AT HUNTERS RUN CONDOMINIUM ASSOCIATION, INC.			
Principal Place of Business % CMO 3700 CLUBHOUSE LANE BOYNTON BEACH, FL 33436		Mailing Address % CMO 3700 CLUBHOUSE LANE BOYNTON BEACH, FL 33436	
2. Principal Place of Business - No P.O. Box #		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country
6. Name and Address of Current Registered Agent		7. Name and Address of New Registered Agent	
LEVINE, JAY STEVEN 2500 N. MILITARY TRAIL SUITE 275 BOCA RATON, FL 33431		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. I am familiar with, and accept the obligations of registered agent.			
SIGNATURE _____ DATE _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reconstituting)</small>			
Filing Fee is \$61.25 Due by May 1, 2008		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$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	SD <input type="checkbox"/> Delete	TITLE	VD <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	NUSBAUM, BARBARA	NAME	NUSBAUM, BARBARA
STREET ADDRESS	3700 CLUBHOUSE LANE	STREET ADDRESS	3700 CLUBHOUSE LN
CITY-ST-ZIP	BOYNTON BEACH, FL 33436	CITY-ST-ZIP	BOYNTON BEACH FL 33436
TITLE	SD <input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	SADOWNICK, ARNOLD	NAME	
STREET ADDRESS	3700 CLUBHOUSE LANE	STREET ADDRESS	
CITY-ST-ZIP	BOYNTON BCH, FL 33436	CITY-ST-ZIP	
TITLE	TD <input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	KARP, STEVEN	NAME	
STREET ADDRESS	3700 CLUBHOUSE LANE	STREET ADDRESS	
CITY-ST-ZIP	BOYNTON BEACH, FL 33436	CITY-ST-ZIP	
TITLE	PD <input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	ANDERSON, ALVIN	NAME	
STREET ADDRESS	3700 CLUBHOUSE LANE	STREET ADDRESS	
CITY-ST-ZIP	BOYNTON BEACH, FL 33436	CITY-ST-ZIP	
TITLE	D <input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	BROOK, JACK	NAME	
STREET ADDRESS	3700 CLUBHOUSE LANE	STREET ADDRESS	
CITY-ST-ZIP	BOYNTON BEACH, FL 33436	CITY-ST-ZIP	
TITLE	D <input type="checkbox"/> Delete	TITLE	D <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	BLOCH, LARRY	NAME	BLOCH, LAWRENCE
STREET ADDRESS	3700 CLUBHOUSE LANE	STREET ADDRESS	3700 CLUBHOUSE LN
CITY-ST-ZIP	BOYNTON BEACH, FL 33436	CITY-ST-ZIP	BOYNTON BEACH, FL 33436
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 like empowered.			
SIGNATURE: _____		Date: 4/17/08 561-734-5000	
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		Date Daytime Phone #	

40080434



04042008 Chg-NP CR2E037 (12/06)

4. FEI Number **59-2076260** Applied For Not Applicable

5. Certificate of Status Desired **\$8.75** Additional Fee Required