

2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 767860

FILED
Jan 30, 2012
Secretary of State

Entity Name: WESTVIEW CONDOMINIUM ASSOCIATION NO. NINE, INC.

Current Principal Place of Business:

8362 PINES BLVD #309
PEMBROKE PINES, FL 33024 US

New Principal Place of Business:

Current Mailing Address:

8362 PINES BLVD #309
PEMBROKE PINES, FL 33024 US

New Mailing Address:

FEI Number: 59-2322255

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

KAYE & BENDER, P.L.
1200 PARK CENTRAL SOUTH
POMPANO BEACH, FL 33064 US

Name and Address of New Registered Agent:

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

OFFICERS AND DIRECTORS:

Title: VPD
Name: SHUKER, MARY S
Address: 1192 NW 97 AVE
City-St-Zip: PEMBROKE PINES, FL

Title: TD
Name: WELL, AVIS
Address: 1056 NW 97TH AVE
City-St-Zip: PEMBROKE PINES, FL

Title: D
Name: TURNER, ELAINE MS.
Address: 1208 NW. 97TH AVE
City-St-Zip: PEMBROKE PINES, FL

Title: PD
Name: HAVEY, DEBRA
Address: 1136 NW 97 AVE #228
City-St-Zip: HOLLYWOOD, FL 33024

Title: D
Name: WRIGHT, KATHI
Address: 1412 NW 97 AVE #262
City-St-Zip: HOLLYWOOD, FL 33024

Title: D
Name: MAZZA, JOANNE
Address: 1096 NW 97 AVE
City-St-Zip: PEMBROOKE PINES, FL 33024

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 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: MARY SHUKER

PD

01/30/2012

Electronic Signature of Signing Officer or Director

Date