

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 769836

FILED
Jan 09, 2006
Secretary of State

Entity Name: WESTCHESTER COMMUNITY MASTER ASSOCIATION, INC.

Current Principal Place of Business:

C/O CAMPBELL PROPERTY MANAGEMENT
1215 E HILLSBORO BLVD
DEERFIELD BEACH, FL 33441 US

New Principal Place of Business:

Current Mailing Address:

C/O DICKER, KRIVOK & STOLOFF, P.A.
1818 AUSTRALIAN AVE S., STE 400
WEST PALM BEACH, FL 33409 US

New Mailing Address:

FEI Number: 59-2420161

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DICKER, KRIVOK STOLOFF PA
C/O DICKER, KRIVOK & STOLOFF, P.A.
1818 AUSTRALIAN AVE S., STE 400
WEST PALM BEACH, FL 33409 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: TD () Delete
Name: NEWMARK, BOB
Address: 6900 ASHTON ST
City-St-Zip: BOYNTON BEACH, FL 33437

Title: PD () Delete
Name: LEVENSON, HAROLD
Address: 1211 BAY CLUB DR
City-St-Zip: BOYNTON BEACH, FL 33437

Title: VPD () Delete
Name: HOCHHEISER, BARRY
Address: 6710 SUN RIVER ROAD
City-St-Zip: BOYNTON BEACH, FL 33437

Title: SD () Delete
Name: BEMBEM, SOL
Address: 5813 NORTHPOINTE LANE
City-St-Zip: BOYNTON BEACH, FL 33437

Title: VPD () Delete
Name: TATES, HOWARD
Address: 12291 WEDGE WAY
City-St-Zip: BOYNTON BEACH, FL 33437

Title: D () Delete
Name: REEDER, MICHAEL
Address: 7331 FALLS ROAD WEST
City-St-Zip: BOYNTON BEACH, FL 33437

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated 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 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 an address, with all other like empowered.

SIGNATURE: BOB NEWMARK

TD

01/09/2006

Electronic Signature of Signing Officer or Director

Date