

2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000005932

FILED
Apr 28, 2011
Secretary of State

Entity Name: WESTON 55 PLUS MASTER ASSOCIATION, INC.

Current Principal Place of Business:

11355 S.W. 84TH STREET
MIAMI, FL 33173

New Principal Place of Business:

Current Mailing Address:

C/O CASTLE GROUP
P.O. BOX 559009
FT. LAUDERDALE, FL 33355

New Mailing Address:

FEI Number: 20-5939144 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

MARS, GARY M
150 WEST FLAGLER ST
27TH FLOOR
MIAMI, FL 33130 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: PD
Name: ALBOUKREK, ISAAC
Address: 16102 EMERALD ESTATES DRIVE #265
City-St-Zip: WESTON, FL 33331

Title: D
Name: UMSCHWEIS, FRED
Address: 16135 EMERALD ESTATES DRIVE #372
City-St-Zip: WESTON, FL 33331

Title: VPD
Name: AGRESSS, NORMA
Address: 16102 EMERALD ESTATES DRIVE #201
City-St-Zip: WESTON, FL 33331

Title: SD
Name: WATKINS, WENDELL
Address: 16101 EMERALD ESTATES DRIVE, #341
City-St-Zip: WESTON, FL 33331

Title: TD
Name: BROWN, GARY
Address: 16134 EMERALD ESTATES DRIVE
City-St-Zip: WESTON, FL 33331

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: ROBERT A. DONNELLY

MGR

04/28/2011

Electronic Signature of Signing Officer or Director

Date