

FILE NOW: FILING FEE AFTER MAY 1 IS \$155.00

CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
Sandra B. Northington
Secretary of State
DIVISION OF CORPORATIONS

APPROVED
AND
FILED

95 APR 26 AM 11:12

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # N12350

(7)

1. Corporation Name

COUNTRY GREENS AT WESTCHESTER HOMEOWNERS' ASSOCIATION, INC.

Principal Place of Business

Mailing Address

C/O ALLSTATE PROPERTY MGMT. & REALTY, INC.
21000 BOCA RIO ROAD, A-9
BOCA RATON FL 33433

C/O ALLSTATE PROPERTY MGMT. & REALTY, INC.
21000 BOCA RIO ROAD, A-9
BOCA RATON FL 33433

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified
12/03/1985

3a. Date of Last Report
05/16/1994

4. FEI Number
65-0011161

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution ☐

\$5.00 May Be
Added to Fees

7. Nonprofit with IRS 501(c)(3)
Tax Exempt Status ☐

\$68.75 Supplemental
Fee Not Required

8. This corporation has liability for intangible tax under S. 109.032,
Florida Statutes ☒ Yes ☐ No

2. Principal Place of Business

2a. Mailing Address

21 C/O CMB Management, Inc.

26 C/O CMB Management, Inc.

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22 3082 Jog Road

27 3082 Jog Road

City & State

City & State

23 Lake Worth, FL

28 Lake Worth, FL

Zip

Country

Zip

Country

24 33467

25 USA

29 33467

30 USA

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

ALLSTATE PROPERTY MANAGEMENT & REALTY, INC
21000 BOCA RIO ROAD, A-9
BOCA RATON FL 33433

81 Name
David C. Rosenthal

82 Street Address (P.O. Box Number is Not Acceptable)

C/O CMB Management, Inc.

83 3082 Jog Road

84 City

Lake Worth

FL

85 Zip Code

33467

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

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

(NOTE: Registered Agent signature required when reappointing)

DATE

David C. Rosenthal

4-12-95

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE PD
NAME ANAPOLSKY, SID
STREET ADDRESS 12310 FOREST GREENS DRIVE
CITY - ST - ZIP BOYNTON BEACH FL 33437

1.1 TITLE PD ☒ Change ☐ Addition
1.2 NAME Bob Marner
1.3 STREET ADDRESS 12209 Country Greens Blvd.
1.4 CITY - ST - ZIP Boynton Beach, FL 33437

TITLE VD
NAME PISANI, BOB
STREET ADDRESS 12082 COUNTRY GREENS BLVD.
CITY - ST - ZIP BOYNTON BEACH FL 33437

2.1 TITLE VD ☒ Change ☐ Addition
2.2 NAME Mickey Fieger
2.3 STREET ADDRESS 12331 Forest Greens Dr.
2.4 CITY - ST - ZIP Boynton Beach, FL 33437

TITLE SD
NAME BLESS, RAY
STREET ADDRESS 12173 COUNTRY GREENS BLVD.
CITY - ST - ZIP BOYNTON BEACH FL 33437

3.1 TITLE D ☐ Change ☒ Addition
3.2 NAME Roy Prentiss
3.3 STREET ADDRESS 12154 Country Greens Blvd.
3.4 CITY - ST - ZIP Boynton Beach, FL 33437

TITLE TD
NAME GRIMALDI, JEANNIE
STREET ADDRESS 12305 COUNTRY GREENS BLVD.
CITY - ST - ZIP BOYNTON BEACH FL 33437

4.1 TITLE ☐ Change ☐ Addition
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY - ST - ZIP

TITLE D
NAME MCKOAN, MARION
STREET ADDRESS 12167 COUNTRY GREENS BLVD.
CITY - ST - ZIP BOYNTON BEACH FL 33437

5.1 TITLE D ☒ Change ☐ Addition
5.2 NAME Leonard Brownstein
5.3 STREET ADDRESS 12159 Forest Greens Blvd.
5.4 CITY - ST - ZIP Boynton Beach, FL 33437

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

6.1 TITLE D ☐ Change ☒ Addition
6.2 NAME Charlie Travis
6.3 STREET ADDRESS 12231 Forest Greens Blvd.
6.4 CITY - ST - ZIP Boynton Beach, FL 33437

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

DATE

Daytime Phone #

Jeannie Grimaldi

4/26/95