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NONPROFIT CORPORATION **ANNUAL REPORT**

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #

N26712

WESTCHESTER COUNTRY OLUB HOMEOWNERS! ASSOCIATION

FILED Jul 22 1998 8:00am Secretary of State

| , INC. | MEDILIT GOOTHIN GEOD | TIOMES WILLIO 710 | 5001,1110 | • | | | | | |
|-----------------------------|--|--|-------------------|------------------|-----------------|--|--|------------------------|--|
| Principal Place of Business | | Mailing Address | | | | L INSTENDI DEN 11810 DIVIT INDUST JEDIO ESDI | OLORI MIBIE BIBEL DIBIL | DIGH BIBH (BD) | |
| 12241 FAIRWAY | | 1215 E HILLSBORO BLVD. DEERFIELD BEACH FL 33441 | | | | 3. Date Incorporated or Qualified | | | |
| US | 1 1 6 33437 | US | | | | 06/01/1988 | | | |
| | | | | | | 4. FEI Number | 1 | Applied For | |
| 2. Principal F | lace of Business | 2a. Mailing Address | | | | 65-0182373 | | Not Applicable | |
| 21 | idos of Bosinioos | 26 | ¬ • | | | 5. Certificate of Status Desired | | Additional Regulred | |
| Suite, Apt. | #, etc. | Suite, Apt. #, etc. | | | | 6. Election Campaign Financing | | May Be | |
| 22 | | 27 | 27 | | | , | | to Fees | |
| City & Stat | 6 | City & State | | | | | 7. Is this nonprofit corporation a homeowners association? | | |
| 23 | | 28 | | | | ¥ Yes □ No | | | |
| Zip | Country | Zip | , -, | | | 8. This corporation owes or has paid the current year intangible Personal Property Tax due June 30. Yes No | | | |
| 24 | 9. Name and Address of Currer | 29 nt Registered Agent | 30 | | | Personal Property Tax due June 30 10. Name and Address of New Regis | | INO | |
| | | | | 31 | Name | | | | |
| CAMPBELL PROPERTY MGMT | | | | | 6 | | | | |
| | HILLSBORO BLVD. | | [' | 32 | Street A | ddress (P.O. Box Number is Not Acceptable) |) | | |
| | ELD BEACH FL 33441 | | Ī | 33 | | · · · · · · · · · · · · · · · · · · · | | | |
| | | | ļ. | j4 | City | | les 7 | Code | |
| • | · | | | ~ | City | | FL 85 Zip | Code | |
| 11. Pursuant | to the provisions of Sections 617.050 | 22 and 617.1508, Florida Sta | tutes, the abo | ove | -named c | orporation submits this statement for the pur | pose of changing | its registered | |
| agent. I a | m familiar with, and accept the oblig | ations of, Section 617.0503, | Florida Statu | tes. | , tue corbo | orporation submits this statement for the pur oration's board of directors. I hereby accept t | пе арропштетк в | s registered | |
| SIGNATURE | | | | | | | | | |
| 12. | Signature, typed or printed name of registered ag- | | IO1E: Registered | Ager | nt signature re | quired when reinstating) ADDITIONS/CHANGES TO OFFICER | DATE | DC INL 10 | |
| TITLE | OFFICERS AN | DELETE | 1.1 TITL | F | | ADDITIONS/CHANGES TO OFFICE | Change | | |
| NAME | TATES, HOWARD | | 1.2 NAA | | 1 | | | | |
| STREET ADDRESS | 12291 WEDGE WAY | | | | ADDRESS | | | | |
| CITY-ST-ZIP | BOYNTON BEACH FL 33437 | | 1.4 CITY | | | | | | |
| TITLE | ♣ D | DELETE | 2.1 TITL | | | A D | Change | ☐ Addition | |
| NAME | KATZ, ROBERT | | 2.2 NAN | Æ | 11 | RAUS JOSEPH 12 339 PLEASANT | ^~~ | | |
| STREET ADDRESS | 12400 SAND WEDGE DR. | | 2.3 STR | EET A | ADDRESS | 183397LEASANT | GHEEN | MAY | |
| CITY-ST-ZIP | BOYNTON BEACH FL 33437 | | 2. 4 CIT | 2. 4 CITY-ST-ZIP | | BOYNTON BEACH FL 3 | 33437 | | |
| TITLE | → D | DELETE | 3.1 TITL | .E | 3 | (PD) | Change | Addition | |
| NAME | MILLER, ROBERT | | 3.2 NAM | AE. | 6 | STEWART STEXE ANYT | SREEN L | VAC | |
| STREET ADDRESS | 12487 PLEASANT GREEN WA | YY | 3.3 STR | EET | ADDRESS | 19393 AFFLDVINI (| | OA (| |
| CITY-ST-ZIP | BOYNTON BEACH FL 33437 | | 3.4. CIT | | T-ZIP | BOYNTON BEACH, FL | 33437 | | |
| TITLE | · P | ☐ DELETE | 4.1 TITL | E | | • | ☐ Change | Addition | |
| NAME | BRAIMAN, JULIAN | | 4. 2 NA | | | | | | |
| STREET ADDRESS | 12334 WEDGE WAY | | 4.3 STA | EET / | ADDRESS | | | | |
| CITY-ST-ZIP | 0.5.770 | | 4.4 CiTY | | r-ZiP | | Tal | A 4410 | |
| TITLE | ♥ . | | 5.1 TiTL | | | | ☐ Change | ☐ Addition | |
| NAME | RANDALL, RAY | 112 | 5.2 NAV | | | | | | |
| STREET ADDRESS | 12459 PLEASANT GREEN WA | lY. | | | ADDRESS | | | | |
| CITY-ST-ZIP | BOYNTON BEACH FL 33437 | December | 5.4 CITY | | -ZIP | | Charme | A datii. | |
| TITLE | , and the second | ☐ DELETE | 6.1 TITL | | | | Change | ☐ Addition | |
| NAME | | | 6.2 NAN | | - 1 | | | | |
| STREET ADDRESS | • | | 6.3 STR | EET / | ADDRESS | | | | |

6.4 CITY-ST-ZIP 14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i). 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.