## 2002 UNIFORM BUSINESS REPORT (UBR)

SIGNATURE:

## Mar 13, 2002 8:00 am § Secretary of State DOCUMENT # N26712 03-13-2002 90033 050 \*\*\*\*61.25 WESTCHESTER COUNTRY CLUB HOMEOWNERS' ASSOCIATION Principal Place of Business Mailing Address 12241 FAIRWAY PINES DR. 1215 E HILLSBORO BLVD. BOYNTON BCH FL 33437 DEERFIELD BEACH FL 33441 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State Applied For City & State 4. FEI Number 65-0182373 Not Applicable Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent DU 5 Box Number is Not Acceptable) Street Address (P CAMPBELL PROPERTY MGMT 1215 E HILLSBORO BLVD. 4150 **DEERFIELD BEACH FL 33441** 8. 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 d name of registered agent and title if applicable 9. Election Campaign Financing \$5.00 May Be Make Check Pavable to FILE NOW: FEE IS \$61.25 Trust Fund Contribution. Added to Fees Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 10. OFFICERS AND DIRECTORS 11. DP ☐ Addition (9/01) TITLE □ Delete TITLE Change NAME TATES, HOWARD NAME STREET ADDRESS STREET ADDRESS CR2E037 12291 WEDGE WAY CITY-ST-ZIP CITY-ST-ZIP **BOYNTON BEACH FL 33437** ☐ Addition TITLE ☐ Delete TITLE ☐ Change NAME NAME MILLER, ROBERT STREET ADDRESS STREET ADDRESS 12487 PLEASANT GREEN WAY CITY-ST-ZIP. CITY-ST-ZIP. BOYNTON BEACH FL-33437-TITLE ☐ Addition TD Delete GILDEA WILLIAM NAME GOLDEN, WILLIAM NAME STREET ADDRESS STREET ADDRESS 12292 PLEASANT GREEN WAY CITY-ST-ZIP CITY-ST-ZIP BOYTON BCH FL 33457 X Delete TITI F Addition TITLE NAME NAME JAMES, GUY STREET ADDRESS STREET ADDRESS 12470 PLEASANT GREEN WAY CITY-ST-ZIP CITY-ST-ZIP **BOYNTON BEACH FL 33437** Delete ☐ Addition TITLE NAME FRADELLA, JOSEPH NAME STREET ADDRESS STREET ADDRESS 12421 SAND WEDGE DRIVE CITY-ST-ZIP CITY-ST-ZIP **BOYNTON BEACH FL 33437** ☐ Change ☐ Addition TITLE TITLE ☐ Delete NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 12. 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 report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

**FILED**