2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED Apr 19, 2004 8:00 am Secretary of State 04-19-2004 90349 002 ****61.25

1. Entity Nam WESTBR	MENT # N50185 OOK ISLES CONDOMINIUM	01.25						
Principal Place of Business SW SWAN LAKE CIRCLE PORT SAINT LUCIE, FL 34986 US Mailing Address SW SWAN LAKE CIRCLE PORT SAINT LUCIE, FL 34986 US				\$4040044				
2. Principal Pl		3. Mailing Address LIO 9 SWS Suite, Apt. #, etc.	wan LaKe	Geole 04082004 Chg-NP CR2E037 (10/03)				
City & State		City & State		4. FEI Number Applied For 65-0389710 Not Applicable				
Zip	Country	Zip	Country	5. Certificate of Status Desired S8.75 Additional Fee Required				
	6. Name and Address of Current F	Registered Agent		7. Name and Address of New Registered Agent				
MEWHIRTER, NAOMI E 1109 SW SWANLAKE CIRCLE PORT SAINT LUCIE, FL 34986				Name Street Address (P.O. Box Number is Not Acceptable)				
	20012, / 2 0 1000		-					
			City	FL Zip Code				
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. I am familiar with, and accept the obligations of registered agent.								
SIGNATURE Nami E. MEWHIRTER PD Namu E. Mewhirter 04/15/04 Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE								
	Filing Fee Is \$61.25 Due by May 1, 2004	- 9. Election Cam Trust Fund Co		\$5.00 May Be Added to Fees Florida Department of State				
10.	•	Trust Fund Co		F1				
10.	Due by May 1, 2004	Trust Fund Co	ontribution.	Added to Fees Florida Department of State				
	Due by May 1, 2004 OFFICERS AND DIR	Trust Fund Co	ontribution.	Added to Fees Florida Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 Addition Addition				
TITLE NAME STREET ADDRESS	OFFICERS AND DIR PD MEWHIRTER, NAOMI E 1132 SW SWAN LAKE CIRCLE	Trust Fund Co	11. TITLE NAME STREET ADDRESS	Added to Fees Florida Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 Change Addition ITO 9 SW SWANLAKE CIRCLE				
TITLE NAME	PD MEWHIRTER, NAOMI E 1132 SW SWAN LAKE CIRCLE PORT SAINT LUCIE, FL 34986	Trust Fund Co	11. IIILE NAME	Added to Fees Florida Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 The Change Addition 1109 SW SWANLAKE CIRCLE PORT ST LUCIE, FL 34986				
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	PD MEWHIRTER, NAOMI E 1132 SW SWAN LAKE CIRCLE PORT SAINT LUCIE, FL 34986 SD	Trust Fund Co	Ontribution. 11. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	Added to Fees Florida Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 TO Change Addition ITO 9 SW SWANLAKE CIRCLE PORT ST LUCIE, FL 34986 SD Addition				
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	PD MEWHIRTER, NAOMI E 1132 SW SWAN LAKE CIRCLE PORT SAINT LUCIE, FL 34986 SD COLLINS, PATRICIA	Trust Fund Co	Ontribution. 11. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	Added to Fees Florida Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 R Change Addition 1109 SW SWANLAKE CIRCLE PORT ST LUCIE, FL 34986 SD Change Addition				
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TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	Due by May 1, 2004 OFFICERS AND DIR PD MEWHIRTER, NAOMI E 1132 SW SWAN LAKE CIRCLE PORT SAINT LUCIE, FL 34986 SD COLLINS, PATRICIA 1123 SW SWAN LAKE CIRCLE PORT SAINT LUCIE, FL 34986	Trust Fund Co	Ontribution. 11. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	Added to Fees Florida Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 Change Addition ITO 9 SW SWANLAKE CIRCLE FORT ST LUCIE, FL 34986 SD Change Addition CIOTTI, JANE 1109 SW SWANLAKE CIRCLE FORT ST LUCIE, FL 34986				
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	PD MEWHIRTER, NAOMI E 1132 SW SWAN LAKE CIRCLE PORT SAINT LUCIE, FL 34986 SD COLLINS, PATRICIA 1123 SW SWAN LAKE CIRCLE	Trust Fund Co	Ontribution. 11. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	Added to Fees Florida Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 The Change Addition ITO 9 SW SWANLAKE CIRCLE PORT ST LUCIE, FL 34986 SU Change Addition CIOTTI, JANE ILO 9 SW SWANLAKE CIRCLE FORT ST LUCIE, FL 34986 TD Change Addition				
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TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME TREET ADDRESS CITY-ST-ZIP TITLE	Due by May 1, 2004 OFFICERS AND DIR PD MEWHIRTER, NAOMI E 1132 SW SWAN LAKE CIRCLE PORT SAINT LUCIE, FL 34986 SD COLLINS, PATRICIA 1123 SW SWAN LAKE CIRCLE PORT SAINT LUCIE, FL 34986 TD MARCEAU, LAURETTA 1124 SW SWAN LAKE CIRCLE PORT SAINT LUCIE, FL 34986 VPD	Trust Fund Co	Ontribution. 11. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	Added to Fees Florida Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 Change Addition ITO 9 SW SWANLAKE CIRCLE PORT ST LUCIE, FL 34986 CIOTTI, JANE ITO 9 SW SWANLAKE CIRCLE FORT ST LUCIE, FL 34986 Change Addition CIOTTI, JANE ITO 9 SW SWANLAKE CIRCLE FORT ST LUCIE, FL 34986 TO WICHARD CHANGES TO SWANLAKE CIRCLE FORT ST LUCIE, FL 34986 TO SWANLAKE CIRCLE PORT ST LUCIE, FL 34986				
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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.

SIGNATURE: Marone & Mercherter	NAOMI E.	MEWHIRTER	15/772-871-	516
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIREC	ROT	Dale	Daytime Phone #	
				



FLORIDA DEPARTMENT OF STATE Glenda E. Hood Secretary of State

April 8, 2004

WESTBROOK ISLES CONDOMINIUM ASSOCIATION, INC. SW SWAN LAKE CIRCLE PORT SAINT LUCIE. FL 34986 US

SUBJECT: WESTBROOK ISLES CONDOMINIUM ASSOCIATION, INC.

Ref. Number: N50185

We have received your document for WESTBROOK ISLES CONDOMINIUM ASSOCIATION, INC. and check(s) totaling \$61.25. However, your check(s) and document are being returned for the following:

Although you attempted to file your annual report form online, you did not successfully complete the process. Therefore, we are returning the enclosed check along with an annual report form for you to complete. Please return the completed form and check to this office for processing.

Only applications approved by the Department of State are acceptable. Please

complete the enclosed approved application and return it to our office.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6059.

Justin M Shivers Document Specialist

Letter Number: 704A00022992