NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED May 01, 2002 8:00 am Secretary of State

1. Entity Name					05-01-2002 91521 022 ****61.25		
Westbrooke Homeowners Association, Inc.							
	DO NOT WRITE	E IN THIS S	PACE				
2. Principal	Place of Business	3. Mailing Address	3 ,48.				
4087 Hwy 1 South P. Suite, Apt. #, etc.			P.O. Box 236684 Suite, Apt. #. etc.				
Juite, Api	. π, G.C.	Suite, Apt. #, etc.			DO NOT WRITE IN THIS S	PACE	
City & Sta Rockled	lge, FL	City & State Cocoa, FL		4. FEI Numb 59-337		Applied For Not Applicable	
Zip , 32955	Country	Zip 32923-6684 ==	Country			8.75 Additional ee Required	
	in the second se		9 - 7		Address of Current Registered		
*			Name	Morris J. Watrsky	•		
. •	DO NOT W		Street A	ddress (P.O. Box Numb	er is Not Acceptable)		
Sec. 1	IN THIS SI	PACE	Tanky and Mary	700 NI W 407 A		, , , , , , , , , , , , , , , , , , , ,	
in the second se			The Line	700 N.W. 107 Av	1111111	Zip Code	
9 The shows	e named entity submits this statement f			Miami	FL	33172	
SIGNATURE	Signature, typed or printed name of registered agen	s and title if applicable. (NO	TE: Registered Agent signatu	re required when reinstating)	DATE		
	Signature, typed or printed name of registered agent FEE IS \$61.25 Initial or Amended UBR	9. Election Ca Trust Fund	mpaign Financing	store required when reinstating) \$5.00 May B Added to Fees	Make Check Departmen		
10.	FEE IS \$61.25 Initial or Amended UBR OFFICERS AND D	9. Election Ca Trust Fund	impaign Financing Contribution.	\$5.00 May E	Be Make Check		
	FEE IS \$61.25 Initial or Amended UBR OFFICERS AND DI P/D Dan Herman	9. Election Ca Trust Fund	mpaign Financing	\$5.00 May E	Be Make Check		
10.	FEE IS \$61.25 Initial or Amended UBR OFFICERS AND DI	9. Election Ca Trust Fund	impaign Financing Contribution.	\$5.00 May E	Be Make Check		
10. TITLE NAME STREET ADDRESS CITY-ST-ZIP TIFLE	P/ID Dan Herman 4087 Hwy 1 South Rockledge, FL 32955	9. Election Ca Trust Fund	Impaign Financing Contribution. IIILE NAME STREET ADDRESS CITY ST-ZIP TITLE	\$5.00 May E	Be Make Check		
10. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	P/D Dan Herman 4087 Hwy 1 South Rockledge, FL 32955	9. Election Ca Trust Fund	Impaign Financing Contribution. TITLE NAME STREET ADDRESS CHY-ST-ZIP TITLE NAME	\$5.00 May E	Be Make Check		
10. TITLE NAME STREET ADDRESS CITY-ST-ZIP TIFLE	P/ID Dan Herman 4087 Hwy 1 South Rockledge, FL 32955 VP/D Kathy O'Dell	9. Election Ca Trust Fund	Impaign Financing Contribution. IIILE NAME STREET ADDRESS CITY ST-ZIP TITLE	\$5.00 May E	Be Make Check		
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12. I nereby 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 on an attachment with an address. With all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/15/02 (32)/433-2007

Daytime Phone #