

FILE NOW: FILING FEE IS \$61.25

FILED
May 17, 1999 8:00 am
Secretary of State

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NONPROFIT CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
 Secretary of State
 DIVISION OF CORPORATIONS

DOCUMENT # N96000000200 ✓

1. Corporation Name
WESTMINSTER COMMUNITY ASSOCIATION, INC.

Principal Place of Business
 C/O William R. Seach
 1220 South Ocean Boulevard
 Delray Beach, FL 33483

Mailing Address
 C/O William R. Seach
 1220 South Ocean Boulevard
 Delray Beach, FL 33483



21	2. Principal Place of Business	2a. Mailing Address	3. Date Incorporated or Qualified
	Suite, Apt. #, etc.	Suite, Apt. #, etc.	01/11/1996
22	City & State	City & State	4. FEI Number
	Zip	Zip	65-0642752
23	Country	Country	Applied For
			Not Applicable
24			5. Certificate of Status Desired
			<input checked="" type="checkbox"/> \$8.75 Additional Fee Required
			6. Election Campaign Financing
			Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees

81	9. Name and Address of Current Registered Agent	82	10. Name and Address of New Registered Agent
	FLEMING, MICHAEL MARQUIS MANAGEMENT INC 9400 GLADIOLUS DR, SUITE 100 FORT MYERS FL 33908		William R. Seach 1220 South Ocean Boulevard Delray Beach, FL 33483
83		84	
		85	Zip Code

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, 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 617.0503, Florida Statutes.

SIGNATURE William R. Seach WILLIAM R. SEACH 4-30-99
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PD <input checked="" type="checkbox"/> DELETE	1.1 TITLE	PD <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	MILTON, JEFFREY J	1.2 NAME	David Seach
STREET ADDRESS	12661 METRO PARKWAY STE A	1.3 STREET ADDRESS	1220 South Ocean Blvd.
CITY-ST-ZIP	FORT MYERS FL	1.4 CITY-ST-ZIP	Delray Beach, FL 33483
TITLE	VPD <input checked="" type="checkbox"/> DELETE	2.1 TITLE	VPD <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	SCOGGINS, V. PAUL	2.2 NAME	William R. Seach
STREET ADDRESS	12661 METRO PARKWAY STE A	2.3 STREET ADDRESS	1220 South Ocean Boulevard
CITY-ST-ZIP	FORT MYERS FL	2.4 CITY-ST-ZIP	Delray Beach, FL 33483
TITLE	ST <input checked="" type="checkbox"/> DELETE	3.1 TITLE	SD <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	KAPFER, GREGORY M	3.2 NAME	Marilyn G. Seach
STREET ADDRESS	12261 METRO PARKWAY STE A	3.3 STREET ADDRESS	1220 South Ocean Boulevard
CITY-ST-ZIP	FORT MYERS FL	3.4 CITY-ST-ZIP	Delray Beach, FL 33483
TITLE	D <input checked="" type="checkbox"/> DELETE	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	NAUMANN, JOHN J	4.2 NAME	
STREET ADDRESS	12661 METRO PARKWAY STE A	4.3 STREET ADDRESS	
CITY-ST-ZIP	FORT MYERS FL	4.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		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, with all other like empowered.

SIGNATURE: William R. Seach WILLIAM R. SEACH 4-30-99 561-276-3122
Signature and typed or printed name of signing officer or director Date Daytime Phone #

CR2E037 (11/98)