

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 27, 2001 8:00 am
Secretary of State

RL 5580

DOCUMENT # N96000000200

1. Entity Name

WESTMINSTER COMMUNITY ASSOCIATION, INC.

04-27-2001 90313 041 ****61.25

Principal Place of Business

C/O WILLIAM R. SEACH
 1220 S. OCEAN BLVD
 DELRAY BEACH FL 33483
 US

Mailing Address

C/O WILLIAM R. SEACH
 1220 S. OCEAN BLVD
 DELRAY BEACH FL 33483
 US

2. Principal Place of Business

Suite, Apt. #, etc.

City & State

Zip

Country

3. Mailing Address

Suite, Apt. #, etc.

City & State

Zip

Country

C/O BENSON'S, INC

12650 WHITEHALL DR

FORT MYERS, FL

33907

US



DO NOT WRITE IN THIS SPACE

4. FEI Number

65-0642752

Applied For

Not Applicable

5. Certificate of Status Desired



\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

SEACH, WILLIAM R
 1220 S. OCEAN BLVD
 DELRAY BEACH FL 33483

7. Name and Address of New Registered Agent

Name

MARK R. BENSON

Street Address (P.O. Box Number is Not Acceptable)

12650 WHITEHALL DR

City

FORT MYERS

FL

Zip Code

33907

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

4-19-01

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW:
FEES IS \$61.25

9. Election Campaign Financing Trust Fund Contribution.

\$5.00 May Be Added to Fees

Make Check Payable to Department of State

10. OFFICERS AND DIRECTORS

TITLE	PD	<input type="checkbox"/> Delete
NAME	SEACH, DAVID	
STREET ADDRESS	1220 S. OCEAN BLVD	
CITY-ST-ZIP	DELRAY BEACH FL 33483	
TITLE	VPD	<input type="checkbox"/> Delete
NAME	SEACH, WILLIAM R	
STREET ADDRESS	1220 S. OCEAN BLVD	
CITY-ST-ZIP	DELRAY BEACH FL 33483	
TITLE	SD	<input type="checkbox"/> Delete
NAME	SEACH, MARILYN G	
STREET ADDRESS	1220 S. OCEAN BLVD	
CITY-ST-ZIP	DELRAY BEACH FL 33483	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
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.

SIGNATURE: *William R Seach* - WILLIAM R. SEACH - V.P. 4/16/01 561-276-3122

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (10/00)