FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION **ANNUAL REPORT**

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # N96000000974 (3)

WESTPOINTE BUSINESS PARK ASSOCIATION, INC.

Principal Place of Business Mailing Address										1 162311EL BIB IB130 BEITE BBitt BBitt BBitt DBitt BBitt BBitt BBitt BBitt BBitt BBitt
2525 °C* STREET					2525 °C* STREET					3. Date Incorporated or Qualified
SUITE 500				SUITE 500						02/23/1996
ANCHORAGE AL 99509					ANCHORAGE AL 99509					4. FEI Number Applied For
										65-0747927 Not Applicable
2. Principal P	lace of Busin	ness	2a. Mailing Address 26					· · · · · ·	5. Certificate of Status Desired Security \$8.75 Additional Fee Required	
Suite, Apt.	#, etc.	Suite, Apt. #, etc.						6. Election Campaign Financing \$5.00 May Be		
22		27						Trust Fund Contribution Added to Fees		
City & State	e	City & State						7. Is this nonprofit corporation a homeowners association?		
23	23				28					☐ Yes D 1NO
Zip			ountry		Zip	├	ountry	′		8. This corporation owes or has paid the current year Intangible
24	9. Name and Address of Current			29					Personal Property Tax due June 30. Yes No 10. Name and Address of New Registered Agent	
<u> </u>	a, reame	anu A	rodiass of Collect	negisti	areo Agent		81	ΙN	lame	10. Name and Address of New Registered Agent
43 7734451	CTUART						82	Ĺ		
100 SE	I, STUART					S	Street Address (P.O. Box Number is Not Acceptable)			
100 SE										
MIAMI F								_		
							84	Ī	City	FL 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 a	ım familiar w	ith, and	d accept the obligat	tions of,	Section 617.0503, F	lorida St	atutes	s.	o bo por anno	or o source or an ootone or thousand appointment as registered
SIGNATURE										
Signature, typed or printed name of registered agent and title if applicable 12. OFFICERS AND DIRECTORS							E- Registered Agent signature requi			d when reinslating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITUE	DP		OFFICERS AND	DINEC	DELETE		TITLE			Change Addition
NAME	MCGEE	KIRK	. 8				NAME			_ Consulto
STREET ADDRESS			EET SUITE 500				STREET	r ann	nerec	
CITY-ST-ZIP	1		AL 99509				CITY-S		ł	
TITLE	DVT	IVIOL	712 00000		DELETE		TITLE	11-21	<u>"</u>	Change Addition
NAME	BECK, F	SICHA	Rn w				NAME			
STREET ADDRESS	,		EET SUITE 500				STREET	Ann	DRESS	
CITY-ST-ZIP			AL 99509					2. 4 CITY - ST - ZIP		
TITLE	DS				DELETE		TITLE	U1 - 41		Change Addition
NAME	ALTMAN	i, stu	JART H			3.2	NAME			
STREET ADDRESS	100 SE 2ND ST 17TH FLOOR					3.3	3.3 STREET ADDRESS		DRESS	
CITY-ST-ZIP	MIAMI F					ſ	CITY -		ĺ	
TITLE					DELETE	_	TITLE			☐ Change ☐ Addition
NAME						4.2	NAME		-	<u> </u>
STREET ADDRESS						4.3	STREET	OCA	DRESS	
CITY-ST-ZIP						4.4	CITY-S	T- ZI	P	
TITLE					DELETE	5.1	TITLE			☐ Change ☐ Addition
NAME						5.2	NAME			
STREET ADDRESS						5.3	STREET	ADD	DRESS	ļ
CITY-ST-ZIP							CITY-S	r-Zi	Р	
TITLE					DELETE	61	TITLE			Change Addition
NAME						6.2	NAME		- 1	
STREET ADDRESS						6.3	STREET	ADD	DAESS	
חוד בם עדום	l						0.777 0		. I	

14. Thereby 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 frustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if chapped, or on an attachment with an address.

SIGNATURE:

FILED

May 15 1998 8:00am

Secretary of State

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