

2003 NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 22, 2003 8:00 am
Secretary of State

04-22-2003 90046 001 ****70.03

DOCUMENT # N96000000974

1. Entity Name

WESTPOINTE BUSINESS PARK ASSOCIATION, INC.



Principal Place of Business

**2525 "C" STREET
SUITE 500
ANCHORAGE AK 99503-2689**

Mailing Address

**2525 "C" STREET
SUITE 500
ANCHORAGE AK 99503-2689**

2. Principal Place of Business

3526 Spottswood Ave.
Suite, Apt. #, etc.

3. Mailing Address

3526 Spottswood Ave.
Suite, Apt. #, etc.



☐ CHECK HERE IF MAKING CHANGES

City & State

Memphis, Tennessee

City & State

Memphis, Tennessee

4. FEI Number **65-0747927**

Applied For

Not Applicable

Zip

38111

Country

USA

Zip

38111

Country

USA

5. Certificate of Status Desired ☒

**\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

**ALTMAN, STUART H
100 SE 2ND ST
17TH FLOOR
MIAMI FL 33131**

7. Name and Address of New Registered Agent

Name

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

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

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

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW: FEE IS \$61.25

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

**Make Check Payable to
Florida Department of State**

10. OFFICERS AND DIRECTORS

TITLE **D** ☒ Delete
NAME **MC GEE, KIRK S**
STREET ADDRESS **2525 "C" STREET SUITE 500**
CITY-ST-ZIP **ANCHORAGE AK 99503-2689**

TITLE **DPT** ☒ Delete
NAME **BECK, RICHARD W**
STREET ADDRESS **2525 "C" STREET SUITE 500**
CITY-ST-ZIP **ANCHORAGE AK 99503-2689**

TITLE **S** ☒ Delete
NAME **ALTMAN, STUART H**
STREET ADDRESS **100 SE 2ND ST 17TH FLOOR**
CITY-ST-ZIP **MIAMI FL 33131**

TITLE **DV** ☐ Delete
NAME **WILLINCHAM, ROBERT**
STREET ADDRESS **3526 SPOTSWOOD AVE.**
CITY-ST-ZIP **MEMPHIS TN 38111**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE **DP** ☒ Change ☐ Addition
NAME **Willingham, Robert**
STREET ADDRESS **3526 Spottswood Ave.**
CITY-ST-ZIP **Memphis, Tennessee 38111**

TITLE **DV** ☐ Change ☒ Addition
NAME **Abreu, Cid**
STREET ADDRESS **8805 NW 35th Lane**
CITY-ST-ZIP **Miami, FL 33172**

TITLE **S** ☐ Change ☒ Addition
NAME **Mesa, Rolando**
STREET ADDRESS **3511 NW 91st Ave.**
CITY-ST-ZIP **Miami, FL 33172**

TITLE **D** ☐ Change ☒ Addition
NAME **Jacavino, Richard**
STREET ADDRESS **801 Grand Ave.**
CITY-ST-ZIP **Des Moines, Iowa 50392-1370**

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ 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:

REQUIRED

4/21/03

CR2E037 (10/02)