

2014 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 725429

Entity Name: WESTPORT CONDOMINIUM, ASSOCIATION INC**Current Principal Place of Business:**312 NORTHLAKE DRIVE
NO. PALM BEACH, FL 33408**Current Mailing Address:**312 NORTHLAKE DRIVE
NO. PALM BEACH, FL 33408 US**FEI Number: 59-1670047****Certificate of Status Desired: No****Name and Address of Current Registered Agent:**WYANT-CORTEZ, V. CLAIRE ESQ.
860 US HWY 1 SUITE 108
NORTH PALM BEACH, FL 33408 US*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:**_____
Electronic Signature of Registered Agent_____
Date**Officer/Director Detail :**

Title	PRES
Name	MCDERMOTT, MATTHEW
Address	312 NORTHLAKE DR #206
City-State-Zip:	NORTH PALM BEACH FL 33408

Title	VP
Name	BELLAVANCE, BRUCE
Address	312 NORTHLAKE DR #306
City-State-Zip:	NORTH PALM BEACH FL 33408

Title	VP
Name	MULFORD, WALTER
Address	8315 S. BATES ROAD
City-State-Zip:	PALM BEACH GARDENS FL 33418

Title	TRES
Name	GLAUB, TRENTON
Address	312 NORTHLAKE DR #106
City-State-Zip:	NORTH PALM BEACH FL 33408

Title	SEC
Name	GLAUB, STACY
Address	312 NORTHLAKE DR #104
City-State-Zip:	NORTH PALM BEACH FL 33408

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with all other like empowered.

SIGNATURE: MATTHEW MCDERMOTT**PRESIDENT****03/10/2014**_____
Electronic Signature of Signing Officer/Director Detail_____
Date