

**2013 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 769836

**Entity Name:** WESTCHESTER COMMUNITY MASTER ASSOCIATION, INC.

**FILED**  
**Apr 18, 2013**  
**Secretary of State**  
**CC5535848837**

**Current Principal Place of Business:**

C/O CAMPBELL PROPERTY MANAGEMENT  
1215 E HILLSBORO BLVD  
DEERFIELD BEACH, FL 33441

**Current Mailing Address:**

C/O DICKER, KRIVOK & STOLOFF, P.A.  
1818 AUSTRALIAN AVE S., STE 400  
WEST PALM BEACH, FL 33409 US

**FEI Number: 59-2420161**

**Certificate of Status Desired: No**

**Name and Address of Current Registered Agent:**

DICKER, KRIVOK STOLOFF PA  
C/O DICKER, KRIVOK & STOLOFF, P.A.  
1818 AUSTRALIAN AVE S., STE 400  
WEST PALM BEACH, FL 33409 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 TD  
Name NEWMARK, BOB  
Address 6900 ASHTON ST  
City-State-Zip: BOYNTON BEACH FL 33437

Title PD  
Name WAGNER, BEVERLY  
Address 12167 COUNTRY GREENS BLVD  
City-State-Zip: BOYNTON BEACH FL 33437

Title VPD  
Name HOCHHEISER, BARRY  
Address 6710 SUN RIVER ROAD  
City-State-Zip: BOYNTON BEACH FL 33437

Title SD  
Name REEDER, MICHAEL  
Address 7331 FALLS ROAD WEST  
City-State-Zip: BOYNTON BEACH FL 33437

Title VPD  
Name IANNAZZONE, JOSEPH  
Address 6338 WESTCHESTER CLUB DRIVE  
City-State-Zip: BOYNTON BEACH FL 33437

*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: BEVERLY WAGNER**

**PRES**

**04/18/2013**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date