

**2016 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N30663

**Entity Name:** WESTWOOD COUNTRY ESTATES PROPERTY OWNERS ASSOCIATION, INC.**Current Principal Place of Business:**1083 SW KEATS AVE  
PALM CITY, FL 34990**Current Mailing Address:**P.O. BOX 2294  
PALM CITY, FL 34991 US**FEI Number:** 65-0205967**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**ROSS EARLE & BONAN, P.A.  
789 S FEDERAL HWY., STE 101  
STUART, FL 34994 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	PRESIDENT
Name	GIUFFREDA, RICHARD
Address	1083 SW KEATS AVE
City-State-Zip:	PALM CITY FL 34990

Title	TREASURER
Name	MOEHRING, MICHAEL
Address	PO BOX 2294
City-State-Zip:	PALM CITY FL 34991

Title	DIRECTOR
Name	RODGERS, JOHN
Address	1123 SW KEATS
City-State-Zip:	PALM CITY FL 34990

Title	DIRECTOR
Name	ERNST, KELLY
Address	P.O. BOX 2294
City-State-Zip:	PALM CITY FL 34991

Title	SECRETARY
Name	LINDA, PICK
Address	P.O. BOX 2294
City-State-Zip:	PALM CITY FL 34991

*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: MICHAEL MOEHRING****TREASURER****03/23/2016**\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail\_\_\_\_\_  
Date