## 2007 NOT-FOR PROFIT CORPORATION ANNUAL REPORT

## **DOCUMENT #711098** WESTBROOK CONDOMINIUM APTS., INC. Principal Place of Business Mailing Address 412 SOUTH LUNA COURT 412 SOUTH LUNA COURT

**FILED** May 01, 2007 08:00 A Secretary of State

HOLLTWOOD	, FL 33021 F	IULLTWOOD, FL 33021					
r	O NOT WRITE II	CE	04202007	No Chg-NP	,	5037 (4/06)	
	O NOT WATE	<b>J</b> L	4. FEI Numb 65-040 5. Certificate			Applied For Not Applicable  \$8.75 Additional Fee Required	
	6. Name and Address of Current Regis						
412 S. LUI #5	N, SARA L NA CT. DOD, FL 33021	DO NOT WRITE IN THIS SPACE					
the obligat	named entity submits this statement for the pions of registered agent.	ourpose of changing its registere	ed office or registe	ered agent, or bo	th, in the State of Flo	vida. I am	familiar with, and accept
SIGNATURE.	Signature, typed or printed name of registered agent and title	of applicable. (NOTE: Registers)	d Agent signature required when reinstating) DATE				
	Filing Fee is \$61.25 Due by May 1, 2007		5.00 May Be ded to Fees				
10.	OFFICERS AND DIREC	CTORS	1				
TITLE Name	P HARRISON, SARA L						
STREET ADDRESS	412 S. LUNA CT. #5		Į.				
CITY-ST-ZIP	HOLLYWOOD, FL 33021		Ē				
TITLE	vs		1				
NAME	MAQUEDA, STELLA	•	i				i
STREET ADDRESS	412 S LUNA CR, #2						
CITY-ST-ZIP	HOLLYWOOD, FL 33021		ł				
TITLE NAME	D BEAUFILS, GHISLAYNE						
STREET ADDRESS	412 S LUNA CT STE 6		1	20	NOT W		-
CITY-ST-ZIP	HOLLYWOOD, FL 33021			טט	NOT W	KII	
TESLE	Т			IN	THIS SE	PACI	<b>=</b>
NAME	SABATINO, MARY		•	11.4		7401	
STREET ADDRESS CITY-ST-ZIP	412 S LUNA CT STE 9						
	HOLLYWOOD, FL 33021		•				
TITLE NAME	D KAIŞER, HELEN						İ
STREET ADDRESS	412 S. LUNA COURT, #12				(Brimani	びいフロン	200
CITY-ST-ZIP	HOLLYWOOD, FL 33021					00752: 7-200	303 14-015 61.25
TILE	D				00/21/0	1 000	ring Oraco
NAME	JONES, DANIEL						
STREET ADDRESS	412 SO LUNA CT, # 11						
CITY-ST-ZIP	HOLLYWOOD, FL 33021		<b>.</b>				

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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.

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Sara L. Harrison

954-483-8610