2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 720770

1. Entity Name

SIGNATURE:

GOLD KEY VILLAS WEST, INC.

Principal Plac	ce of Business	}	Mailing	Mailing Address									
2211 N.W. 81 SUNRISE FL 3 US			2211 N.W. 81 TERRACE SUNRISE FL 33322 US										
]			PIAN ANAM ANA		
2. Principal Place of Business 3. Mailing Addr					ddress								
Suite, Apt.	. #, etc.		Suite, Apt. #, etc.				DO NOT WRITE IN THIS SPACE						
City & Stat	te		City & State					4. FEI Number 59-1519976 Applied For Not Applicable					
Zip Country			Zip Co			ountry 5. Certificate of Si				atus Desired S8.75 Additio			
 	6 Nome	and Address of Current	Doglotoro	1 Acont	. 1			7 Name and A	ddress of New Reg		ee Require	0	
	o. Name	and Address of Current	negistered	Agent .		Name	,		<i>.</i>		jent	•	
					-				ChRAGER				
WOODS, KRISTI						Street A	Address (P	.O. Box Number	is Not Acceptable)			: .	
2441 NW 82ND WAY)	(41 -22	STREET				
SUNRISE FL 33322						City /	77 70	Was.	J/REE!		Zip Code		
						<u>ි</u>	unri	se		FL	333.	22_	
	named entity tions of registe	submits this statement fo	r the purpo	se of changing its	registere	d office o	r registere	ed agent, or both,	in the State of Florid	la. I am fa	miliar with,	and accept	
the obligat		orea agont.											
SIGNATURE .	YIA	breein SIA	Les						-	7-2	-02		
SIGNATORIE	Signature, typed	or printed name of registered agent	and title if appli	cable. (NOTE	: Registered	Agent signal	ture required v	when reinstating)		DATE			
									<u> </u>				
After September 13, 2002, 9. Election Camp						- WOLOG MAY DE			Make	Make Check Payable to			
	min. wil	be \$236.25.	,	Trust Fund C	ontributio	on,		Added to Fees	Dep	partment	of State	,	
10.		OFFICERS AND DIF	RECTORS		11.		Δ	DDITIONS/CHAN	L IGES TO OFFICERS	AND DIRE	CTORS IN	10	
TITLE	D	OT TOLTO AND DI	12010110	☐ Delete	TITLE		ر م	DETTIONSTOTIAL	IGES TO CIT TOETIS		Change	☐ Addition	
NAME	SANTIAGO	, SYLVIA		LJ Delete	NAME			V GREE	N		 onungo		
STREET ADDRESS		5TH STREET			STREE	T ADDRESS	823	Y GREE. 5 NW 24	1-5T.				
CITY-ST-ZIP	SUNRISE F	FL 33322			CITY-	ST-ZIP		213E, FL.					
TITLE	TD			☐ Delete	TITLE		TD	.1		Ţ	🔏 Change	☐ Addition	
NAME	DIEZ, RICA				NAME		Chri	stive Ho,	PPE				
STREET ADDRESS	8200 NW 2				.1	T ADDRESS		NW SI TE					
CITY-ST-ZIP	SUNRISE I	L.33322	. :		1 -	ST-ZIP .		e15t, FL.	<u> </u>		Channa	- Addition	
TITLE Name	BELNAVIS,	CARL		☐ Delete	TITLE		3D	MARY PAI	NKIEWICZ	ا ح_	Change	☐ Addition	
STREET ADDRESS		23RD STREET				T ADDRESS	8150	NW 25	Pi.	_			
CITY-ST-ZIP	SUNRISE F	L 33322			CITY-	ST-ZIP		ISE, FL.					
TITLE	VD			☐ Delete	TITLE		VD	,		[Change	Addition	
NAME	WAITE, CO				NAME		Virg.	INIA SMO	LLER				
STREET ADDRESS		S1 TERRACE				T ADDRESS	2240	NW 81	Terr.				
CITY-ST-ZIP	SUNRISE F	·L 33322		<u></u>	+	ST-ZIP		15E, F-L.	33366	r	∀ (a)		
TITLE Name	WOODS, K	RISTI		☐ Delete	TITLE NAME		PD	ICIA SCH	PRACE	j.	Change	Addition	
STREET ADDRESS	2441 NW 8					T ADDRESS		NW23				ĺ	
CITY-ST-ZIP	SUNRISE F					ST-ZIP		2/3E, FL.					
TITLE				☐ Delete	TITLE		P	,	_ 		Change	Addition	
NAME					NAME		Loui	s Espos	ito			{	
STREET ADDRESS	٠.				STREE	T ADDRESS	2290	NW817	err.				
CITY-ST-ZIP	I				CiTY-	ST-ZIP	Duni	013F. FL	. <u>3332</u> 2				

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.

7-2-02

FILED

Jul 08, 2002 8:00 am Secretary of State 07-08-2002 90230 013 ****61.25

<u>954-741-8807</u>