

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
May 19, 2002 8:00 am
Secretary of State

05-19-2002 90191 004 ****61.25

DOCUMENT # 734051

1. Entity Name

WEST KEN LARK HOMEOWNERS' ASSOCIATION, INC.

Principal Place of Business

Mailing Address

**1480 N.W. 33RD AVE.
 FORT LAUDERDALE FL 33311**

**1480 N.W. 33RD AVE.
 FORT LAUDERDALE FL 33311**

2. Principal Place of Business

3. Mailing Address

Same as above

same as above

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

65-0003661

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**BRADLEY, JAMES
 1480 NW 33RD AVENUE
 FT. LAUDERDALE FL 33311**

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. 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

James Bradley

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW: FEE IS \$61.25

9. Election Campaign Financing Trust Fund Contribution.

\$5.00 May Be Added to Fees

Make Check Payable to Department of State

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE NAME	PD BRADLEY, JAMES	<input type="checkbox"/> Delete
STREET ADDRESS	1480 N.W. 33RD AVE.	
CITY-ST-ZIP	FT. LAUDERDALE FL 33311	
TITLE NAME	VD WRIGHT, DORIS	<input type="checkbox"/> Delete
STREET ADDRESS	3290 N.W. 13TH ST.	
CITY-ST-ZIP	FT. LAUDERDALE FL 33311	
TITLE NAME	SD DIXSON, CLEO	<input type="checkbox"/> Delete
STREET ADDRESS	3241 N.W. 13TH CT.	
CITY-ST-ZIP	FT. LAUDERDALE FL 33311	
TITLE NAME	TD HOLMES, HELEN	<input type="checkbox"/> Delete
STREET ADDRESS	1481 NW 33RD TERR	
CITY-ST-ZIP	FT. LAUDERDALE FL 33311	
TITLE NAME		<input type="checkbox"/> Delete
STREET ADDRESS		
CITY-ST-ZIP		
TITLE NAME		<input type="checkbox"/> Delete
STREET ADDRESS		
CITY-ST-ZIP		

TITLE NAME		<input type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS	Same	
CITY-ST-ZIP		
TITLE NAME		<input type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS	Same	
CITY-ST-ZIP		
TITLE NAME		<input type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS	Same	
CITY-ST-ZIP		
TITLE NAME		<input type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS	Same	
CITY-ST-ZIP		
TITLE NAME		<input type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS		
CITY-ST-ZIP		

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.

SIGNATURE: *James Bradley*
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER

March 8, 2002 (954) 735-1966

CR2E037 (9/01)