

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 737409

FILED  
Apr 28, 2009  
Secretary of State

**Entity Name:** THE WESTCHESTER CONDOMINIUM ASSOCIATION UNIT II, INC.

**Current Principal Place of Business:**

2264 WINKLER AVE  
FORT MYERS, FL 33901 US

**New Principal Place of Business:**

**Current Mailing Address:**

12650 WHITEHALL DRIVE  
FORT MYERS, FL 33907

**New Mailing Address:**

C/O REALTY SERVICES  
2525 PARKWAY STREET  
FORT MYERS, FL 33901

**FEI Number:** 59-1995615

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

VANDALL, BONITA D  
12650 WHITEHALL DRIVE  
FORT MYERS, FL 33907 US

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

REALTY SERVICES  
2525 PARKWAY STREET  
FORT MYERS, FL 33901 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: MICHAEL MCVETY

04/28/2009

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: D ( ) Delete  
Name: BREWINGTON, PAUL  
Address: 2264 WINKLER AVE #104  
City-St-Zip: FORT MYERS, FL 33901

Title: PD ( ) Delete  
Name: SHAFER, LARRY  
Address: 2264 WINKLER AVE #210  
City-St-Zip: FORT MYERS, FL 33901

Title: VD ( ) Delete  
Name: SILLBERZAHN, PHYLLIS  
Address: 2264 WINKER AVE 309  
City-St-Zip: FORT MYERS, FL 33901

Title: D ( ) Delete  
Name: MCCOSKEY, JERRY  
Address: 2264 WINKLER AVE #308  
City-St-Zip: FORT MYERS, FL 33901

Title: SD ( ) Delete  
Name: GLOINO, ROSALIE  
Address: 2264 WINKLER AVE 111  
City-St-Zip: FORT MYERS, FL 33901

Title: TD ( ) Delete  
Name: BUCK, JENNIFER  
Address: 2264 WINKLER AVE 205  
City-St-Zip: FORT MYERS, FL 33901

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: D (X) Change ( ) Addition  
Name: FLAHERTY, JAMES  
Address: 2264 WINKLER AVE #214  
City-St-Zip: FORT MYERS, FL 33901

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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 an address, with all other like empowered.

SIGNATURE: LARRY SHAFER

P

04/28/2009

Electronic Signature of Signing Officer or Director

Date