


2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
May 03, 2004 8:00 am
Secretary of State

05-03-2004 91066 039 ****61.25

DOCUMENT # 749252	
1. Entity Name THE WESTLAKE ESTATES HOMEOWNERS ASSOCIATION, INC.	

Principal Place of Business 1717 20TH ST. SUITE #102 VERO BEACH, FL 32960	Mailing Address 1717 20TH ST. SUITE #102 VERO BEACH, FL 32960
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2. Principal Place of Business 3111 CARDINAL DR Suite, Apt. #, etc.	3. Mailing Address 3111 CARDINAL DR. Suite, Apt. #, etc.
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City & State -VERO BCH, FL	City & State VERO BCH, FL
Zip 32963	Zip 32963
Country U.S.	Country U.S.



04262004 Chg-NP CR2E037 (10/03)

4. FEI Number 65-0254351		Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required		
6. Name and Address of Current Registered Agent MILLER, WILLIAM F KEYSTONE PROPERTY MANAGEMENT GR. INC. 1717 20TH ST. SUITE #102 VERO BEACH, FL 32960		7. Name and Address of New Registered Agent Name DANIEL E. FIELD CPA Street Address (P.O. Box Number is Not Acceptable) / D'HAIRE, KMETZ CPAs 3111 CARDINAL DR. City VERO BCH FL Zip Code 32963

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE *Daniel E Field c.p.a.* DANIEL E. FIELD c.p.a. 4/26/04
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

Filing Fee is \$61.25 Due by May 1, 2004	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	Make check payable to Florida Department of State
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10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD FLETCHER, TED 7423 S. 16TH MANOR VERO BEACH, FL 32966 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD MISCHLER, KENNETH 7463 NORTH 16TH MANOR VERO BEACH, FL 32966 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD ECHEL, BEAVER 7435 16TH MANOR S VERO BEACH, FL 3266 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD DIAZ, MICHAEL 7481 NORTH 16TH MANOR VERO BEACH, FL 32966 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD COOPER, JAMES 7405 16th manor VERO BCH, FL 32966 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition LISTING AT LEFT
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD PHILLIPS, VICTORIA 7469 16th manor VERO BCH, FL 32966 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition LISTING AT LEFT

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: *Kenneth Mischler* **4/30/04** **772-778-4535**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #