

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 30, 2001 08:00 AM
Secretary of State

DOCUMENT # 754426

1. Entity Name
 THE WESTHAMPTON CLUB, INC.

Principal Place of Business 12765 W. FOREST HILL BLVD #1302 WELLINGTON FL 33414 US	Mailing Address 12765 W. FOREST HILL BLVD #1302 WELLINGTON FL 33414 US
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2. Principal Place of Business 12769 W. FOREST HILL BLVD.	3. Mailing Address 11924 FORREST HILL BLVD.
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Suite, Apt. #, etc. SUITE E	Suite, Apt. #, etc. SUITE 22-221
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City & State WELLINGTON FL	City & State WELLINGTON FL
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Zip 33414	Country US	Zip 33414	Country US
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4. FEI Number
59-3310401

Applied For	Not Applicable
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5. Certificate of Status Desired \$8.75 Additional Fee Required

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

NELSON MICHAEL H
 12765 W FOREST HILL BLVD
 #1302
 WELLINGTON FL 33414 US

7. Name and Address of New Registered Agent

Name
 PALERMO GEORGE J
 Street Address (P.O. Box Number is Not Acceptable)
 11924 FOREST HILL BLVD
 SUITE 22-221
 City
 WELLINGTON FL Zip Code
 33414

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 **GEORGE PALERMO** DATE **04/30/2001**

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	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D <input type="checkbox"/> Delete
MULLING THOMAS 12765 W FOREST HILL BLVD #1302 WELLINGTON FL 33414	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	AS <input type="checkbox"/> Delete
NELSON MICHAEL 12765 W. FOREST HILL BLVD #1302 WELLINGTON FL 33414	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TSD <input type="checkbox"/> Delete
OLSON DIANE 12765 W FOREST HILL BLVD, #102 WELLINGTON FL 33414	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD <input type="checkbox"/> Delete
REZNER KAREN 12765 W FOREST HILL BLVD, #1302 WELLINGTON FL 33414	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
MULLING MARIA 2749 YARMOUTH CT WELLINGTON FL 33414	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DVP <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
MULLING THOMAS 2749 YARMOUTH CT WELLINGTON FL 33414	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DS <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
DONNELLY KAREN 12641 WESTHAMPTON CR., # C311 WELLINGTON FL 33414	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DT <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
OLSON DIANE 12641 WESTHAMPTON CR., # C312 WELLINGTON FL 33414	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DP <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
REZNER KAREN 12641 WESTHAMPTON CR. # C302 WELLINGTON FL 33414	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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: **KAREN REZNER** DP 04/30/2001

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Day-time Phone #

CR2E037 (11/00)