

FILE NOW: FILING FEE IS \$61.25

NONPROFIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Morham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # C94000000009 (3)

1. Corporation Name

WESTVIEW COUNTRY CLUB



Principal Place of Business

2601 N.W. 119TH ST.
MIAMI FL 33167

Mailing Address

2601 N.W. 119TH ST.
MIAMI FL 33167

3. Date Incorporated or Qualified
07/24/1947

3a. Date of Last Report
03/01/1995

2. Principal Place of Business

2a. Mailing Address

21

26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

City & State

City & State

23

28

Zip

Country

Zip

Country

24

25

29

30

4. FEI Number
59-0585738

Applied For
Not Applicable

5. Certificate of Status Desired

☐ \$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

☐ \$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

ARKIN, L. JULES
1111 LINCOLN RD.
SUITE 500
MIAMI BEACH FL 33139

81 Name

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

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

OFFICERS AND DIRECTORS

13.

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE	NAME	STREET ADDRESS	CITY - ST - ZIP	DELETE
DP	JACOBSON, DONALD	2601 N.W. 119 ST.	MIAMI FL 33167	<input type="checkbox"/>
DV	BLUMENTHAL, DR. JEFF	2601 N.W. 119 ST.	MIAMI FL 33167	<input type="checkbox"/>
DS	FREEMAN, RICHARD A	2601 N.W. 119 ST.	MIAMI FL 33167	<input checked="" type="checkbox"/>
DV	GOLD, MARK A	2601 N.W. 119 ST.	MIAMI FL 33167	<input type="checkbox"/>
D	CANDIB, MURRAY	2601 N.W. 119 ST.	MIAMI FL 33167	<input checked="" type="checkbox"/>
D	COOPERMAN, SID	2601 N.W. 119 ST.	MIAMI FL 33167	<input checked="" type="checkbox"/>

1.1 TITLE	1.2 NAME	1.3 STREET ADDRESS	1.4 CITY - ST - ZIP	Change	Addition
PRESIDENT	BUDO MAYER	2601 N.W. 119 ST	MIAMI, FL 33167	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
SECRETARY	MS. PEG E. GORSON	2601 N.W. 119 ST.	MIAMI, FL 33167	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
VICE PRESIDENT	MARTIN J. GELB	2601 N.W. 119 ST	MIAMI, FL 33167	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
4.1 TITLE	4.2 NAME	4.3 STREET ADDRESS	4.4 CITY - ST - ZIP	<input type="checkbox"/>	<input type="checkbox"/>
5.1 TITLE	5.2 NAME	5.3 STREET ADDRESS	5.4 CITY - ST - ZIP	<input type="checkbox"/>	<input type="checkbox"/>
6.1 TITLE	6.2 NAME	6.3 STREET ADDRESS	6.4 CITY - ST - ZIP	<input type="checkbox"/>	<input type="checkbox"/>

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 registered agent or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed or in an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Daytime Phone #

CR2E037 (12/95)