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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

NONPROFIT CORPORATION ANNUAL REPORT

98/98 AC

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

DOCUMENT # C94000000009 (3)

1. Corporation Name

WESTVIEW COUNTRY CLUB

Principal Place of Business	Mailing Address
2601 N.W. 119TH ST. MIAMI FL 33167	2601 N.W. 119TH ST. MIAMI FL 33167-2665

000002553540--2

06/08/98--01103--003

3. Date Incorporated or Qualified: 07/24/1947 ****131.25 Date of Last Report: 08/04/1996.25

2. Principal Place of Business
21

2a. Mailing Address
26

Suite, Apt. #, etc.
22

Suite, Apt. #, etc.
27

City & State
23

City & State
28

Zip
24

Country
25

Zip
29

Country
30

4. FEI Number: 59-0585738 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ $8.75 Additional Fee Required

☐ $5.00 May Be Added to Fees

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

9. Name and Address of Current Registered Agent

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

10. Name and Address of New Registered Agent

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 _____ DATE
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS			13.		
TITLE	DP	☐ DELETE	1.1 TITLE	P	☒ Change ☐ Addition
NAME	JACOBSON, DONALD		1.2 NAME	Budd Mayer	
STREET ADDRESS	2601 N.W. 119 ST.		1.3 STREET ADDRESS	2601 N.W. 119th Street	
CITY-ST-ZIP	MIAMI FL 33167		1.4 CITY-ST-ZIP	Miami, Florida 33167	
TITLE	DV	☐ DELETE	2.1 TITLE	VP	☒ Change ☐ Addition
NAME	BLUMENTHAL, DR. JEFF		2.2 NAME	Mark Gold	
STREET ADDRESS	2601 N.W. 119 ST.		2.3 STREET ADDRESS	2601 N.W. 119th Street	
CITY-ST-ZIP	MIAMI FL 33167		2.4 CITY-ST-ZIP	Miami, Florida 33167	
TITLE	DS	☐ DELETE	3.1 TITLE	FVP	☒ Change ☐ Addition
NAME	FREEMAN, RICHARD A		3.2 NAME	Arnold Rosen	
STREET ADDRESS	2601 N.W. 119 ST.		3.3 STREET ADDRESS	2601 N.W. 119th Street	
CITY-ST-ZIP	MIAMI FL 33167		3.4 CITY-ST-ZIP	Miami, Florida 33167	
TITLE	DV	☐ DELETE	4.1 TITLE	SVP	☒ Change ☐ Addition
NAME	GOLD, MARK A		4.2 NAME	Dr. Jeffrey Blumenthal	
STREET ADDRESS	2601 N.W. 119 ST.		4.3 STREET ADDRESS	2601 N.W. 119th Street	
CITY-ST-ZIP	MIAMI FL 33167		4.4 CITY-ST-ZIP	Miami, Florida 33167	
TITLE	D	☐ DELETE	5.1 TITLE	S	☐ Change ☐ Addition
NAME	CANDIB, MURRAY		5.2 NAME	Paul Cummings	
STREET ADDRESS	2601 N.W. 119 ST.		5.3 STREET ADDRESS	2601 N.W. 119th Street	
CITY-ST-ZIP	MIAMI FL 33167		5.4 CITY-ST-ZIP	Miami, Florida 33167	
TITLE	D	☐ DELETE	6.1 TITLE	T	☐ Change ☒ Addition
NAME	COOPERMAN, SID		6.2 NAME	Beth Tavlin	
STREET ADDRESS	2601 N.W. 119 ST.		6.3 STREET ADDRESS	2601 N.W. 119th Street	
CITY-ST-ZIP	MIAMI FL 33167		6.4 CITY-ST-ZIP	Miami, Florida 33167	

6/16/98

14. I do 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 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 receiver 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 on an attachment with an address.

SIGNATURE: [signature] SIGNATURE REQUIRED 5-22-97