

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # **F94000006699**

1. Entity Name

THE WESTWIND MANAGEMENT COMPANY

FILED
Mar 13, 2002 8:00 am
Secretary of State

03-13-2002 90071 001 ***158.75

066666 SP

Principal Place of Business

**1255 HIGH BLUFF DR
SUITE #120
SAN DIEGO CA 92130
US**

Mailing Address

**1255 HIGH BLUFF DR
SUITE #120
SAN DIEGO CA 92130
US**

2. Principal Place of Business

Suite, Apt. #, etc.

City & State

Zip

Country

3. Mailing Address

Suite, Apt. #, etc.

City & State

Zip

Country

4. FEI Number

83-0308262

Applied For

Not Applicable

5. Certificate of Status Desired



**\$8.75 Additional
Fee Required**

DO NOT WRITE IN THIS SPACE



6. Name and Address of Current Registered Agent

**CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE FL 32301**

7. Name and Address of New Registered Agent

Name

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

City

FL

Zip Code

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

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

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so.
(See criteria on back) ☐

**FILE NOW!!! FEE IS \$150.00
After May 1, 2002 Fee will be \$550.00
Make Check Payable to Department of State**

10. Election Campaign Financing Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

11. OFFICERS AND DIRECTORS

TITLE **CEO** ☐ Delete
NAME **STRAUSS, MICHAEL**
STREET ADDRESS **12555 HIGH BLUFF DRIVE SUITE 120**
CITY-ST-ZIP **SAN DIEGO CA 92130**

TITLE **P** ☐ Delete
NAME **OSTRIE, WILLIAM**
STREET ADDRESS **12555 HIGH BLUFF DR #120**
CITY-ST-ZIP **SAN DIEGO CA 92130**

TITLE **CFO** ☒ Delete
NAME **STRAUSS, MICHAEL**
STREET ADDRESS **12555 HIGH BLUFF DR., STE 120**
CITY-ST-ZIP **SAN DIEGO CA 92130**

TITLE **VS** ☐ Delete
NAME **LABRECHE, STEPHEN O**
STREET ADDRESS **12555 HIGH BLUFF DR, #120**
CITY-ST-ZIP **SAN DIEGO CA 92130**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☒ Change ☐ Addition
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STREET ADDRESS
CITY-ST-ZIP

13. 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 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if changed, or on an attachment with an address with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2/21/02 **(858) 481-3200 ext 285**

Date

Daytime Phone #

CR2E034 (9/01)