

**2003 FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

FILED
Apr 23, 2003 8:00 am
Secretary of State

04-23-2003 90075 016 ***150.00

DOCUMENT # H33612

1. Entity Name
DAVIE WESTVIEW DEVELOPERS, INC.



Principal Place of Business

~~3313 NE 33RD ST.~~
FT LAUDERDALE FL 33308
US

Mailing Address

~~3313 NE 33RD ST.~~
SUITE 101
FT LAUDERDALE FL 33308
US

2. Principal Place of Business

3337 E OAKLAND PARK BLVD
Suite, Apt. #, etc.

3. Mailing Address

Suite, Apt. #, etc.

City & State

FORT LAUDERDALE FL

City & State

FORT LAUDERDALE FL

Zip

33308

Country

USA

Zip

USA

Country

USA

4. FEI Number

59-2490198

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

☐ CHECK HERE IF MAKING CHANGES

6. Name and Address of Current Registered Agent

JOINER, JAMES D

~~3313 NE 33RD ST.~~
FT LAUDERDALE FL 33308

7. Name and Address of New Registered Agent

Name

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

3337 E OAKLAND PARK BLVD.

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

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

4-20-03

FILE NOW!!! FEE IS \$150.00

After May 1, 2003 Fee will be \$550.00

Make Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE **PSD** ☐ Delete
NAME **JOINER, JAMES D**
STREET ADDRESS **3313 NE 33RD ST.**
CITY-ST-ZIP **FORT LAUDERDALE FL 33308**

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☒ Change ☐ Addition
NAME **3337 E OAKLAND PARK BLVD**
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

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

TITLE ☐ Delete
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CITY-ST-ZIP

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 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with an other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

J.D. JOINER

Date

Daytime Phone #

4-20-03

CR2E034 (10/02)