

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # **K59867** (7)

1. Corporation Name

LAKERIDGE HOMES AT WESTCHESTER, INC.



Principal Place of Business

**6191 HOOK LANE
BOYNTON BEACH FL 33437
US**

Mailing Address

**6191 HOOK LANE
BOYNTON BEACH FL 33437
US**

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

g. Name and Address of Current Registered Agent

3. Date Incorporated or Qualified

01/20/1989

3a. Date of Last Report

08/24/1995

4. FEI Number

65-0098769

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

10. Name and Address of New Registered Agent

**WURTENBERGER, KENNETH P.
C/O WURTENBERGER & SCHOTTENFELD
2875 S UNIVERSITY DR
DAVIE FL 33328**

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 607.0502 and 607.1508, 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 607.0505, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent or other authorized person

Name, typed or printed name of new registered agent

DATE

12. OFFICERS AND DIRECTORS

TITLE **VP PD** ☐ DELETE

NAME **ETTINGER, DAVID**
STREET ADDRESS **5851 WIND DRIFT LANE**
CITY-STATE-ZIP **BOCA RATON FL**

TITLE **PD** ☒ DELETE

NAME **DOBBIN, MITCHELL**
STREET ADDRESS **6304 VIA PALLADIUM**
CITY-STATE-ZIP **BOCA RATON FL**

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-STATE-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-STATE-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-STATE-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-STATE-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1. TITLE **PD.** ☒ Change ☒ Addition

12. NAME

13. STREET ADDRESS

14. CITY-STATE-ZIP

33433

2. TITLE

22. NAME

23. STREET ADDRESS

24. CITY-STATE-ZIP

**563 SIENA COURT
BOCA RATON, FL 33432**

3. TITLE

32. NAME

33. STREET ADDRESS

34. CITY-STATE-ZIP

4. TITLE

42. NAME

43. STREET ADDRESS

44. CITY-STATE-ZIP

5. TITLE

52. NAME

53. STREET ADDRESS

54. CITY-STATE-ZIP

6. TITLE

62. NAME

63. STREET ADDRESS

64. CITY-STATE-ZIP

300001850643

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*****200.00**

☐ Change

☐ Addition

☐ Change

☐ Addition

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☐ Addition

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☐ Change

☐ Addition

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 receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1-22-96 401-738-7990

CR2E034 (12/95)