

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # L99000001381

1. Entity Name

WESTVIEW PLAZA, L.C.

Principal Place of Business

1361 AIRPORT RD., NORTH
NAPLES FL 34104

Mailing Address

1361 AIRPORT RD., NORTH
NAPLES FL 34104-3315

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

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3/27



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

1100 Commercial Blvd. #118

Naples FL 34104

3. Mailing Address

1100 Commercial Blvd. #118

Naples FL 34104

City & State

City & State

4. FEI Number

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired

☐

\$5.00 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

VETTER, RICHARD

1361 AIRPORT RD., NORTH

NAPLES FL 34104

Name

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

1100 Commercial Blvd. #118

Naples FL 34104

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

FILE NOW!!! FEE IS \$50.00
Make Check Payable to Department of State

9. MANAGING MEMBERS/MEMBERS

10. ADDITIONS/CHANGES

TITLE NAME MGR
STREET ADDRESS VETTER, RICHARD
CITY- ST- ZIP 1361 AIRPORT RD., NORTH
NAPLES FL 34104 ☐ Delete

TITLE NAME 1100 Commercial Blvd. #118
STREET ADDRESS Naples FL 34104 ☒ Change ☐ Addition

TITLE NAME ☐ Delete
STREET ADDRESS
CITY- ST- ZIP

TITLE NAME 400003196794-2
STREET ADDRESS -04/05/00--01063--011
CITY- ST- ZIP *****50.00 *****50.00 ☐ Change ☐ Addition

TITLE NAME ☐ Delete
STREET ADDRESS
CITY- ST- ZIP

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

TITLE NAME ☐ Delete
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CITY- ST- ZIP

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

TITLE NAME ☐ Delete
STREET ADDRESS
CITY- ST- ZIP

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

11. 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 is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE:

Richard Vetter
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER OR MANAGER

Date

Daytime Phone #

3/15/2000 (941) 643-6333

CR2E083 (9/99)