FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT . CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

Secretary of State **DIVISION OF CORPORATIONS**

1998

NAPLES FL

Arres De mass

CITY-ST-ZIP

DOCUMENT #

(5)

WESTBURY EMERALD GREENS, INC.

FILED Jan 28 1998 8:00am Secretary of State

34102

Principal Place of Business	of Business Mailing Address		1 10010011 111 10011 10010 11010 10110 0111 81011 8181	li Sinii Ainii Sinii ninii indi
2200 GORDON DRIVE 1167 THIRD ST., SOUTH NAPLES FL 34102	2200 GORDON DRIVE 1167 THIRD ST., SOUTH NAPLES FL 34102		DO NOT WRITE IN THIS SPACE	
US	U\$		3. Date Incorporated or Qualified 04/21/1988	
2. Principal Place of Business	2a. Mailing Address		4. FEI Number	Applied For
1 2200 GORADA DRIVE	26 2200 GORDON A	D RI VE	65-0104586	Not Applicable
Suite, Apt. #, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & State 3 NAPOS FORIOA	City & State 28 ~APUS, KORD	0	Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip Country 4 34/02 25 USA		untry 14	This corporation owes or has paid the current Personal Property Tax due June 30.	irrent year fntangible Yes 🔲 No
9, Name and Address of Current Registered Agent			10. Name and Address of New Registered Agent	
BOND, SCHOENECK & KING		81 Name		·
1167 THIRD STREET SOUTH NAPLES FL 33940		82 Street Addre	Street Address (P.O. Box Number is Not Acceptable)	
70 11 250 1 2 000 10		83		
		84 City	FL	85 Zip Code 70
 Pursuant to the provisions of Sections 607.050; office or registered agent, or both, in the State agent. I am familiar with, and accept the obligation. 	of Florida. Such change was authorize	d by the corporation	oration submits this statement for the purpose on's board of directors. I hereby accept the app	of changing its registered pointment as registered

Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) 12. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. DELETE 1.1 TITLE Change : Addition TITLE NAME DEGROOTE, GARY W 1.2 NAME 1455 LAKESHORE RD STE 201N STREET ADDRESS 1.3 STREET ADDRESS ムチンとグノ CITY-ST-ZIP **BURLINGTON ON** 1.4 City-St-ZiP DELETE Change TITLE 21 TITLE Addition NAME DEGROOTE, MICHAEL H. 2.2 NAME 1100 BURLOAK DRIVE STREET ADDRESS 2.3 STREET ADDRESS **ムネレ 6B2 BURLINGTON ON** CITY-ST-ZiP 2. 4 CITY-ST-ZIP DELETE Change Addition TITLE 3.1 TITLE LUCHAK, FRED NAME **3.2 NAME** 11 VICTORIA STREET STREET ADDRESS 3.3 STREET ADDRESS HAMILTON HMEX BE CITY-ST-ZIP 3.4 CITY-ST-ZIP DELETE TITLE 4.1 TITLE Change Addition PEKARUK, JERRY NAME 4.2 NAME 1100 BURLOAK DRIVE STREET ADDRESS 4.3 STREET ADDRESS **BURLINGTON ON** 47<u>682</u> CITY-ST-ZIP 4.4 CITY-ST-ZIP DELETE Addition TITLE 5.1 TITLE DEGROOTE, MICHEAL G NAME 5.2 NAME 11 VICTORIA ST STREET ADDRESS **5.3 STREET ADDRESS** HAMILTON HMEX BE CITY-ST-ZIP 54 CITY-ST-ZIP DELETE Change : Addition TITLE 6.1 THILE NAME SEXTON, DAVID N. 6.2 NAME STREET ADDRESS 1167 THIRD STREET SOUTH 6.3 STREET ADDRESS

14. 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 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 if changed, or on an attachment with an address.

6.4 CITY-ST-ZIP