

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # M77296

1. Entity Name

WESTBURY EMERALD GREENS, INC.

FILED

00 JAN 18 AM 10: 04

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



DO NOT WRITE IN THIS SPACE

Principal Place of Business

2200 GORDON DR
NAPLES FL 34102
US

Mailing Address

2200 GORDON DRIVE
NAPLES FL 34102-7648
US

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

65-0104586

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

BOND, SCHOENECK & KING
1167 THIRD STREET SOUTH
NAPLES FL 34102

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, 2000 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

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE DV
NAME DEGROOTE, GARY W
STREET ADDRESS 1455 LAKESHORE RD STE 201N BURLINGTON ONT
CITY-ST-ZIP CANADA L7S2J1 ☐ Delete

TITLE DP
NAME DEGROOTE, MICHAEL H
STREET ADDRESS 1100 BURLOAK DRIVE. BURLINGTON ONTARIO
CITY-ST-ZIP CANADA L7L6B2 ☐ Delete

TITLE DV
NAME LUCHAK, FRED
STREET ADDRESS 11 VICTORIA STREET
CITY-ST-ZIP HAMILTON HMEY BERMUDA ☒ Delete

TITLE DVS
NAME PEKARUK, JERRY
STREET ADDRESS 1100 BURLOAK DRIVE. BURLINGTON ONTARIO
CITY-ST-ZIP CANADA L7L6B2 ☐ Delete

TITLE V
NAME SEXTON, DAVID N.
STREET ADDRESS 1167 THIRD STREET SOUTH
CITY-ST-ZIP NAPLES FL 34102 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition
300003114593--8
-01/28/00--01055--017
****150.00 ****150.00

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

TITLE DV
NAME MARTIN, ROBERT W.
STREET ADDRESS 11 VICTORIA STREET
CITY-ST-ZIP HAMILTON, HMEY, BERMUDA ☐ Change ☒ Addition

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

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

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

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:

JERRY PEKARUK
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

1/2/2000

941-262-3214