

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N12246

1. Entity Name

WESTLINKS HOMEOWNER'S ASSOCIATION, INC.

Principal Place of Business

9300 PARK BLVD
SEMINOLE FL 33777
US

Mailing Address

9300 PARK BLVD
SEMINOLE FL 33777
US

2. Principal Place of Business

9300 Westlinks Terr.

3. Mailing Address

9300 Westlinks Terr.

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

Seminole, FL

City & State

Seminole, FL

Zip

33777

Country

USA

Zip

33777

Country

USA

4. FEI Number

59-2772659

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

SCARVELLI, ARTHUR
9410 WESTLINKS TERR
SEMINOLE FL 33777

7. Name and Address of New Registered Agent

Name Rebecca Carstenson

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

9290 Westlinks Terr.

City

Seminole

FL

Zip Code

33777

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)

8/25/02

DATE

After September 13, 2002,
min. will be \$236.25.

9. Election Campaign Financing
Trust Fund Contribution.

☐

\$5.00 May Be
Added to Fees

Make Check Payable to
Department of State

10. OFFICERS AND DIRECTORS

TITLE	V	NAME	MCCOMIS, KARIN	☐ Delete
STREET ADDRESS			9414 WESTLINKS TERR	
CITY-ST-ZIP			SEMINOLE FL 33777	
TITLE	TD	NAME	ANDERSON, DOUGLAS	☐ Delete
STREET ADDRESS			9312 WESTLINKS TERRACE	
CITY-ST-ZIP			SEMINOLE FL 33777	
TITLE	SD	NAME	ANDERSON, DOUGLAS	☐ Delete
STREET ADDRESS			9312 WESTLINKS TERR	
CITY-ST-ZIP			SEMINOLE FL 33777	
TITLE	D	NAME	CERCE, JOYCE	☐ Delete
STREET ADDRESS			9250 WESTLINKS TERR	
CITY-ST-ZIP			SEMINOLE FL 33777	
TITLE	P	NAME	SCARVELLI, ARTHUR	☐ Delete
STREET ADDRESS			9410 WESTLINKS TERR	
CITY-ST-ZIP			SEMINOLE FL 33777	
TITLE	D	NAME	MAGUIRE, EMMETT	☐ Delete
STREET ADDRESS			9352 WESTLINKS TERRACE	
CITY-ST-ZIP			SEMINOLE FL	

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	Secretary	☐ Change ☐ Addition
NAME	Karin Hentschke	
STREET ADDRESS	9414 Westlinks Terr.	
CITY-ST-ZIP	Seminole, FL 33777	
TITLE	Treasurer	☒ Change ☐ Addition
NAME	Chris Walker	
STREET ADDRESS	9250 Westlinks Terr.	
CITY-ST-ZIP	Seminole, FL 33777	
TITLE	Vice President	☒ Change ☐ Addition
NAME	Cynthia Smith	
STREET ADDRESS	9316 Westlinks Terr.	
CITY-ST-ZIP	Seminole, FL 33777	
TITLE	Member at Large	☒ Change ☐ Addition
NAME	Robert Flickinger	
STREET ADDRESS	9332 Westlinks Terr.	
CITY-ST-ZIP	Seminole, FL 33777	
TITLE	President	☒ Change ☐ Addition
NAME	Rebecca Carstenson	
STREET ADDRESS	9290 Westlinks Terr.	
CITY-ST-ZIP	Seminole, FL 33777	
TITLE	Member at Large	☒ Change ☐ Addition
NAME	Mona Jackson	
STREET ADDRESS	9390 Westlinks Terr.	
CITY-ST-ZIP	Seminole, FL 33777	

CR2E037 (4/02)

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

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

8/25/02 800-282-384

FILED
Oct 02, 2002 8:00 am
Secretary of State

08-29-2002 90005 033 ****61.25