2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED Apr 14, 2008 8:00 am Secretary of State

| DOCUMENT # N19250 1. Entity Name WESTBURY HOMEOWNERS ASSOCIATION, INC. | | | | | | 04-14-200 | 8 900 5 6 (| 017 ****6 | 51.25 |
|---|---|---|--|--|---|--|-----------------------------------|---------------------------------|------------------------------|
| 2180 WEST : | e of Business SR 434, SUITE 5000 FL 32779-5044 US | Mailing Address PO BOX 2495 OCALA, FL 34474 US | | | | | NIA BIESE EIGEI GEG | hi Gibis B(g 4) Gib | |
| 2. Principal P | lace of Business - No P.O. Box # | 3. Mailing Address 2180 WEST SR | ailing Address L80 WEST SR 434 | | | | | | |
| | | Suite, Apt. #, etc. SUITE 5000 | Suite, Apt. #, etc. JITE 5000 | | 03272008 | Chg-NP | CR2E03 | 37 (12/06) | |
| City & State C | | City & State LONGWOOD, FL | ity & State NGWOOD, FL | | 4. FEI Number 59-2932 | 599 | | <u> </u> | plied For |
| Zip | Country | Zip 32779 | Country | | 5. Certificate of | Status Desired | | \$8.75 Add | |
| | 6. Name and Address of Current | Registered Agent | | L | 7. Name and A | ddress of New | Registered / | Agent | |
| HART, JAN | | | Name | | | | | | |
| | T SR 434, SUITE 5000 OD, FL 32779-5044 | | Street Ad | ddress (P | O. Box Number | is Not Acceptab | ole) | | |
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| | | | City | | | | FL | Zip Cod | 9 |
| | named entity submits this statement folions of registered agent. | or the purpose of changing its reg | gistered office or | registere | d agent, or both, | in the State of F | florida. I am | familiar with, | and accept |
| | | | | | | | | | |
| SIGNATURE . | | | | | | | | | |
| SIGNATURE. | Signature, typed or printed name of registered agent. | and title if applicable. (NOTE: Re | gistered Agent signatu | ure required a | rhan rainstatino) | | DATE | | 4 + |
| JIGITATORE . | Signature, typed or printed name of registered agent | and title if applicable. (NOTE: Re | gistered Agent signatu | ure required w | rhen reinstating) | | DATE | | |
| | Signature, typed or printed name of registered agent Filling Fee is \$61.25 Due by May 1, 2008 | 9. Election Campa Trust Fund Con | ign Financing | | \$5.00 May Be Added to Fees | | DATE Make checi orida Depar | | |
| 10. | Filing Fee is \$61.25 | 9. Election Campa Trust Fund Con | ign Financing | | \$5.00 May Be | Flo | Make checi orida Depar | tment of S | ate |
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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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 if changed, or on an attachment with an address, with all other like empowered.

| SIGNATURE: | Many Lynn Allen Mary Lynn Allen | 4/1/08 | 352-266-33 | ۶ ۵ (|
|------------|--|--------|-----------------|--------------|
| | SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OF DIRECTOR | Dale | Daytime Phone # | |