



2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 31, 2008 8:00 am
Secretary of State

01-31-2008 90028 040 ****61.25

DOCUMENT # N26712 1. Entity Name WESTCHESTER COUNTRY CLUB HOMEOWNERS' ASSOCIATION, INC.					
Principal Place of Business 12241 FAIRWAY PINES DR. BOYNTON BCH, FL 33437 US			Mailing Address 1165 E BLUE HERON BLVD SUITE K RIVIERA BEACH, FL 33434		
2. Principal Place of Business - No P.O. Box # Suite, Apt. #, etc.		3. Mailing Address Suite, Apt. #, etc.			
City & State Zip Country		City & State Zip Country		4. FEI Number 65-0182373	
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required				Applied For Not Applicable	
6. Name and Address of Current Registered Agent BECKER & POLIAKOFF, P.A. % PETER C. MOLLENGARDEN, ESQ. 500 AUSTRALIAN AVENUE SOUTH - 9TH FLOOR WEST PALM BEACH, FL 33401			7. Name and Address of New Registered Agent Name FLORIDA 1ST ASSOCIATION MANAGEMENT Street Address (P.O. Box Number is Not Acceptable) 1165 EAST BLUE HERON BLVD #K City RIVIERA BCH FL Zip Code 33404		
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 <u><i>Larry Saxton LCAM</i></u> <u>1/28/2008</u> <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE</small>					
Filing Fee is \$61.25 Due by May 1, 2008		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees		Make check payable to Florida Department of State	
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD WIDMAN, LORI 12301 SAND WEDGE DR. BOYNTON BEACH, FL 33437	<input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	P BARRETT, BRYAN 12258 PLEASANT GREEN WAY BOYTON BEACH, FL, 33437	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP2D GOLD, GEORGE 12321 SANDWEDGE DR BOYNTON BEACH, FL 33437	<input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP WIDMAN, LORI 12301 SAND WEDGE DR BOYTON BEACH, FL, 33437	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD GILDER, WILLIAM 12292 WEDGE WAY BOYNTON BEACH, FL 33437	<input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	T FRITTS, STEVE 12480 PLEASANT GREEN WAY BOYTON BEACH, FL, 33437	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S HEFFERNON, SALLY 12358 PLEASANT GREEN WAY BOYNTON BEACH, FL 33437	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	2DVP FRADELLA, JOE 12421 SAND WEDGE DR BOYTON BEACH, FL, 33437	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D FRADELLA, JOSEPH 12421 SAND WEDGE DR. BOYNTON BEACH, FL 33437	<input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	2DVP FRADELLA, JOE 12421 SAND WEDGE DR BOYTON BEACH, FL, 33437	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	 	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	 	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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: <u><i>[Signature]</i></u> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>			<u>1/28/2008</u> <u>561.207.7302</u> <small>Date Daytime Phone #</small>		