2000 UNIFORM BUSINESS REPORT (UBR) DOCUMENT # N28678 1. Entity Name WESTPORT HOMEOWNERS ASSOCIATION, INC. Principal Place of Business 10191 WEST SAMPLE ROAD CORAL SPRINGS FL 33065 US 2. Principal Place of Business Suite, Apt. #, etc. City & State City & State City & State CALDERAZZO, JAMES 10191 W. SAMPLE RD. CORAL SPRINGS FL 33065 City City CALDERAZZO, JAMES 10191 W. SAMPLE RD. CORAL SPRINGS FL 33065 City City

FILED Feb 25, 2000 8:00 am Secretary of State

02-25-2000 90014 038 ****61.25



2. Principal Place of Business		3. Mailing Address							
Suite, Apt.	#, etc.	Suite, Apt. #, etc.	·			DO NOT WRITE	E IN THIS SE	PACE	
City & State	9	City & State		4	4. FEI Number 65-0106582			<u> </u>	oplied For
Zip	Country	Zip	Country	5	i. Certifi	cate of Status Desired		8.75 Add	
	6. Name and Address of Current R	legistered Agent		7.	. Name	and Address of New Re	gistered Ag	ent	
			Name						•
CALDERAZ 10191 W.	Street A	Street Address (P.O. Box Number is Not Acceptable)							
CORAL SPRINGS FL 33065 8. The above named entity submits this statement for the purpose of changing its registered.				City FL Z					е
8. The above	named entity submits this statement for	the purpose of changing its	registered office o	or registered	agent, o	r both, in the state of Flori	da.	L	
SIGNATURE .	Signature, typed or printed name of registered agent ar	nd title if applicable (NOTE	Registered Agent signa	sture required whe	n reinstatin	g)	DATE		
	FILE NOW: FEE IS \$61.25	9. Election Campaign Financing Trust Fund Contribution.		\$5.00 Added to			Make Check Payable to Department of State		
10.	OFFICERS AND DIR		11.	ADI	DITIONS	/CHANGES TO OFFICER	S AND DIRE	CTORS IN	l 10
TITLE NAME STREET AODRESS CITY-ST-ZIP	PD RUBINOFF, RONALD 10097 CLEARY BLVD., STE 252	Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	50-10 Cynth 10963	is Un 3 Nu	derwood 2 ST. Pl 33324		☐ Change	Addition
 -	PLANTATION FL 33324			Plania	<u> </u>	FC 33327			
TITLE	VPSD	Delete	TITLE	1104/0	, A	· kana		Change	Addition Addition
NAME	LIPPMAN, STEVE		NAME OXDEST ADDRESS	Tras / D Robert 580 M	00110	8 448			
STREET ADDRESS	10097 CLEARY BLVD., STE 252		STREET ADDRESS CITY-ST-ZIP	n/. to	1	FL 73324			
CITY-ST-ZIP	PLANTATION FL 33324			PIGNIV	Trun .				
TITLE	D	☐ Delete	TITLE					Change	☐ Addition
NAME	RITTOR, TOM		NAME STREET ADDRESS						
STREET ADDRESS CITY-ST-ZIP	351 NW 110 AVE		CITY-ST-ZIP						
	PLANTATION FL 33324]				C) Channa	- Addition
TITLE		☐ De'ete	TITLE				'	Change	Addition
NAME CARGET ADDRESS			NAME STREET ADDRESS						
STREET ADDRESS CITY-ST-ZIP			CITY-ST-ZIP						
		[7			-			C7 Change	
TITLE		☐ Delete	TITLE NAME	1				☐ Change	☐ Addition
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STREET ADDRESS	^ //		CITY-ST-ZIP						•
CITY-ST-ZIP	L	The Property of the Property o			- 110.0	7/0V() Florid- Ctatus 1	further against	h . sha a a la !	nformation
12. Thereby o	certify that the information supplied with	this tuing does not qualify for	trie exemption sta	aled in Sectio	JI PET NE	/ (3)(I), FIORIDA STATUTES. I	iurtner certii	y inati⊓ê i	mormation

2. I hereby certify that the information's ipplied 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 supplier that 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 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. The like empowered.

SIGNATURE:

COMPLETE AND SELECTION OF SELEC

100. (94)753-7966