

# 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

**FILED**  
**May 09, 2008 8:00 am**  
**Secretary of State**

05-09-2008 90008 007 \*\*\*\*61.25

**DOCUMENT # N42221**

1. Entity Name

**WESTCHESTER LAKE TOWNHOMES HOMEOWNERS  
ASSOCIATION, INC.**



Principal Place of Business

**251 WINDWARD PASSAGE  
SUITE F  
CLEARWATER FL 33767  
US**

Mailing Address

**251 WINDWARD PASSAGE  
SUITE F  
CLEARWATER FL 33767  
US**

40100122



2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

1st MOORE

CR2E037 (10/07)

4. FEI Number **59-3061668**

Applied For  
Not Applicable

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

**JIM NOBLES MANAGEMENT, INC.  
251 WINDWARD PASS SUITE F  
CLEARWATER FL 33767**

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and his or her address.

(NOTE: Registered Agent Signature and address must remain blank)

DATE

**FILE NOW: FEE IS \$61.25  
Due By: May 1, 2008**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$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 **SD** ☐ Delete  
NAME **FONTAINE, HAROLD**  
STREET ADDRESS **2804 COUNTRYSIDE BLVD #1**  
CITY-STATE-ZIP **CLEARWATER FL 33761**

TITLE ☐ Change ☒ Addition  
NAME **Jack Smolko**  
STREET ADDRESS **2810 Countryside Blvd. #6**  
CITY-STATE-ZIP **Clearwater, FL 33761**

TITLE **DT** ☐ Delete  
NAME **BERTRAND, STEVEN**  
STREET ADDRESS **2764 COUNTRYSIDE BLVD #1**  
CITY-STATE-ZIP **CLEARWATER FL 34621**

TITLE ☐ Change ☒ Addition  
NAME **Phillip Ventrella**  
STREET ADDRESS **2768 Countryside Blvd. #1**  
CITY-STATE-ZIP **Clearwater, FL 33761**

TITLE **DVP** ☒ Delete  
NAME **WILFEVR, MICHAEL**  
STREET ADDRESS **2804 COUNTRYSIDE BLVD #2**  
CITY-STATE-ZIP **CLEARWATER FL 34621**

TITLE ☐ Change ☒ Addition  
NAME **Tony Bacon**  
STREET ADDRESS **2768 Countryside Blvd. #2**  
CITY-STATE-ZIP **Clearwater, FL 33761**

TITLE **PD** ☐ Delete  
NAME **WILDFEVR, MICHAEL**  
STREET ADDRESS **2804 COUNTRYSIDE BLVD #2**  
CITY-STATE-ZIP **CLEARWATER FL 33761**

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

TITLE **VPD** ☐ Delete  
NAME **FAULKNER, NANA**  
STREET ADDRESS **2768 COUNTRYSIDE BLVD #1**  
CITY-STATE-ZIP **CLEARWATER FL 33767**

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

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-STATE-ZIP

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

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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: *Michael Wilfevr* 4-23-08