

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 22, 2006 8:00 am
Secretary of State

03-22-2006 90007 038 ****61.25

DOCUMENT # N43178					
1. Entity Name WESTFIELD ESTATES HOMEOWNERS ASSOCIATION, INC.					
Principal Place of Business 5655 SW 192 WAY FT LAUDERDALE, FL 33332 US			Mailing Address 5655 SW 192 WAY FT LAUDERDALE, FL 33332 US		
2. Principal Place of Business 5950 SW 192 TERRACE		3. Mailing Address 5950 SW 192 TERRACE			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State SW RANCHES, FL		City & State SW RANCHES, FL		4. FEI Number NOT APPLICABLE	
Zip 33332		Country USA		Applied For Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required			
6. Name and Address of Current Registered Agent RIVERA, WANDA 5655 SW 192 WAY FT LAUDERDALE, FL 33332			7. Name and Address of New Registered Agent Name: Amy Roskin Street Address (P.O. Box Number is Not Acceptable): 5950 SW 192 TERRACE City: SW RANCHES, FL Zip Code: 33332		
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>Amy Roskin</u> <small>Signature, typed or printed name of registered agent and title if applicable.</small>		Amy C. Roskin <small>(NOTE: Registered Agent signature required when reinstating)</small>		3/7/06 <small>DATE</small>	
Filing Fee is \$61.25 Due by May 1, 2006		9. Election Campaign Financing <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 P/D NAME RIVERA, WANDA STREET ADDRESS 5655 SW 192 WAY CITY-ST-ZIP FORT LAUDERDALE, FL 33332	<input checked="" type="checkbox"/> Delete		TITLE P/D NAME Roskin, Amy STREET ADDRESS 5950 SW 192 TERRACE CITY-ST-ZIP SW RANCHES, FL 33332	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE VPD NAME MORRIS, GEORGE STREET ADDRESS 5755 SW 192 WAY CITY-ST-ZIP FORT LAUDERDALE, FL 33332	<input checked="" type="checkbox"/> Delete		TITLE VPD NAME BRAGG, DOROTHA STREET ADDRESS 19200 SW 54 PL CITY-ST-ZIP SW RANCHES, FL 33332	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE TD NAME LANAL, LINDA STREET ADDRESS 5555 SW 192 WAY CITY-ST-ZIP FORT LAUDERDALE, FL 33332	<input checked="" type="checkbox"/> Delete		TITLE TD NAME KARLA NEWELL, CARLA STREET ADDRESS 5855 SW 192 TERRACE CITY-ST-ZIP SW RANCHES, FL 33332	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE SD NAME KNEE, LISA STREET ADDRESS 5955 SW 192 WAY CITY-ST-ZIP FORT LAUDERDALE, FL 33332	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete		TITLE D NAME MORRIS, GEORGE STREET ADDRESS 5155 SW 192 TERRACE CITY-ST-ZIP SW RANCHES, FL 33332	<input type="checkbox"/> Change <input checked="" 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>Amy Roskin</u> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>		Amy Roskin		3/7/06 954-718-7180 <small>Date Daytime Phone #</small>	