2000 UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 30, 2000 8:00 am
Secretary of State
03-30-2000 90073 039 ****61.25

DOCUMENT # N94000002313

1. Entity Name

WESTMINISTER PLACE HOMEOWNERS ASSOCIATION, INC.

Principal Place of Business	Mailing Address
11250 OLD ST. AUGUSTINE RD. STE. 15-132 JACKSONVILLE FL 32257 US	11250 OLD ST. AUGUSTINE RD. STE. 15-132 JACKSONVILLE FL 32257 US

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	3. Mailing Address
Suite, Apt. #, etc. SUITE 15, P.O.Box 132	Suite, Apt. #, etc. SUITE 15, P.O.Box 132
City & State	City & State
Zip / Country	Zip / Country

4. FEI Number 59-3250385 ☐ 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
STACEY BOWIE 4526 PRINCESS LABETH CT JACKSONVILLE FL 32258	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.

SIGNATURE _____ DATE

Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

FILE NOW: FEE IS $61.25

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

Make Check Payable to Department of State

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	DPT VALERA, DONNA 4539 PRINCESS LABETH CT JACKSONVILLE FL 32258	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	DPT Kevin Daniels 4569 Princess Labeth CT Jacksonville, FL 32258	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	DV ANDERSON, ANDY 4533 PRINCESS LABETH COURT JACKSONVILLE FL 32258	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	DV Douglas Turner 4563 Princess Labeth CT Jacksonville, FL 32258	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	DT BOWIE, STACEY 4526 PRINCESS LABETH CT. JACKSONVILLE FL	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition

CR2E037 (9/99)

12. I hereby certify that the information supplied 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 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: SIGNATURE STACEY BOWIE DT 3/28/00 904-620-6440

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #