2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N98000001010

1. Entity Name

FILED May 16, 2001 8:00 am Secretary of State

05-16-2001 90391 019 ****61.25

WEST BAY CLUB COMMUNITY ASSOCIATION, INC. Principal Place of Business Mailing Address 4800 N FEDERAL HIGHWAY 4800 N FEDERAL HIGHWAY A0068332 SUITE 105E SUITE 105E BOCA RATON, FL 33431 BOCA RATON, FL 33431 2. Principal Place of Business 3. Mailing Address 13790 NW 4TH STREET 13790 NW 4TH STREET DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Suite, Apt. #, etc. SUITE 113 SUITE 113 4. FEI Number Applied For City & State City & State Not Applicable SUNRISE, FL Sunrise, fl 65-0817154 Zip Country \$8.75 Additional Country 5. Certificate of Status Desired 33325 33325 Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) GRAGG, LAWRENCE K. 200 S BISCAYNE BLVD **SUITE 4900** Zip Code City FL MIAMI, FL 33131 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 (NOTE: Registered Agent signature required when reinstating) Signature, typed or printed name of registered agent and title if applicable. Make Check Payable to FILE NOW: 9. Election Campaign Financing \$5.00 May Be Trust Fund Contribution. Department of State Added to Fees FEE IS \$61.25 ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 OFFICERS AND DIRECTORS 10. 11. D۷ X Addition TITLE Delete TITLE NAME GOLDIN, AMY NAME 965 N. NOB HILL RD #208 STREET ADDRESS STREET ADDRESS CITY - ST - ZIP PLANTATION, FL 33324 CITY - ST - ZIP X Addition TITLE DP TITLE Delete WEED, FRANK C NAME NAME STREET ADDRESS 22051 ATLANTIC GULF BLVD STREET ADDRESS CITY - ST - ZIP CITY - ST - ZIP <u>ESTERO, FL 33928</u> Addition TITLE Delete TITLE CASHION, STEPHEN J. 4610 WEST BAY BLVD NAME NAME STREET ADDRESS STREET ADDRESS CITY - ST - ZIP ESTERO, FL 33928 CITY - ST - ZIP Delete TITLE X Addition TITLE AHERN, PATRICK M. C/O AHERN, 2 GREENWICH PLAZA NAME NAME STREET ADDRESS STREET ADDRESS CITY - ST - ZIP GREENWICH, CT 06830 CITY - ST - ZIP X Addition TITLE Delete TITLE MATZICK, LARRY C NAME NAME 22051 ATLANTIC GULF BLVD STREET ADDRESS STREET ADDRESS CITY - ST - ZIP ESTERO, FL 33928 CITY - ST - ZIP ппе Change Addition TITLE Delete NAME NAME STREET ADDRESS STREET ADDRESS CITY - ST - ZIP CITY - ST - ZIP 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

2. 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

AMY GOLDIN
USE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/26/01

954-915-6949 Daytime Phone #

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