

**2000 UNIFORM BUSINESS REPORT (UBR)****DOCUMENT # N99000007063**

1. Entity Name

**WESTLAKE ESTATES PROPERTY HOMEOWNERS ASSOCIATION****FILED**  
**Apr 20, 2000 8:00 am**  
**Secretary of State**

03-02-2000 90182 034 \*\*\*\*61.25

Principal Place of Business

Mailing Address

**235 SOUTH MAITLAND AVENUE #216**  
**MAITLAND FL 32751****235 SOUTH MAITLAND AVENUE #216**  
**MAITLAND FL 32751**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City &amp; State

City &amp; State

Zip

Country

Zip

Country

4. FEI Number

☒ Applied For  
☐ Not Applicable5. 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

**WALKER, BERRY J JR.**  
**235 SOUTH MAITLAND AVENUE #216**  
**MAITLAND FL 32751**

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

Signature, typed or printed name of registered agent and title if applicable

**BERRY J. WALKER, JR.**

(NOTE: Registered Agent signature required when reinstating)

**2/23/2000**

DATE

**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	<input type="checkbox"/> Delete	TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input type="checkbox"/> Change	<input type="checkbox"/> Addition
PSD	WALKER, BERRY J JR.	235 SOUTH MAITLAND AVENUE #216	MAITLAND FL 32751	<input type="checkbox"/>					<input type="checkbox"/>	<input type="checkbox"/>
VD	M. SHANE MURRAY	1399 WEST STATE ROAD 434	LONGWOOD FL 32750	<input type="checkbox"/>					<input type="checkbox"/>	<input type="checkbox"/>
VTD	PIERMONT, SUNIA	735 NORTH THORNTON AVENUE	ORLANDO FL 32803	<input type="checkbox"/>					<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>					<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>					<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>					<input type="checkbox"/>	<input type="checkbox"/>

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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 AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

**BERRY J. WALKER, JR., PRESIDENT****2/23/00 407-644-6535**

Date

Daytime Phone #

*Berry J. Walker, Jr., President***4/3/00**

CR2E037 (9/99)