Apr 13, 1999 8:00 am Secretary of State

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PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P9300000182

1. Corporation Name

WESTCHESTER LAND COMPANY, INC.

| Principal Place | e of Business | | ailing Address | | - | | - I IBBUBE US IBUB UUU BEU BEU BE | itte ##rec ##rec #i | Rider erdeft s | ANTE CONTRACTOR | |
|--|---|----------------------|--|---|--|---|--|---------------------|-----------------------------|-------------------------------------|--|
| 1861 PLACIDA I | | | 61 PLACIDA ROAD | | | | | | | | |
| SUITE 204 SUITE 204 | | | | | | | DO NOT MODEL IN THE SPACE | | | | |
| ENGLEWOOD FL 34223 ENGLEWOOD FL 34223 | | | | | | | DO NOT WRITE IN THIS SPACE | | | | |
| US | • | US | • | | | | 3. Date Incorporated or Qualifed 01/04/1993 | | | | |
| 2. Principal Pl | lace of Business | 2a. | Mailing Address | | | | 4. FEI Number | | App | olied For | |
| 21 | | 26 | | | | | 65-0395386 | | Not | Applicable | |
| Suite, Apt. | #, etc. | | Suite, Apt. #, etc. | | | | 5. Certifcate of Status Desired | | | dditional | |
| 22 | | 27 | | | | | 5. Octahodad of Oldado Boshido | | Fee Rec | quired | |
| City & State | e | | City & State | | | | 6. Election Campaign Financing | | 5.00 | | |
| 23 | | 28 | | | | | Trust Fund Contribution | <u>'</u> | A <u>dded</u> to | Fees | |
| Zip | Country | L | Zip | Cou | ntry | | 8. This corporation owes the current y | | | ا ا | |
| 24 | 25 | 29 | | 30 | | | Personal Property Tax. | Y | | □No | |
| | 9. Name and Address of Currer | nt Regis | tered Agent | | | | 10. Name and Address of New Regi | stered Agen | <u>ıt</u> | | |
| DATO | 05: 00 | | | | 81 | Name | | | | | |
| | SEL, C G | | | | 82 | Street Addre | ess (P.O. Box Number is Not Acceptable) | | | | |
| 1861 PLACIDA ROAD | | | | | | | | | | | |
| | E 204 | | | | 83 | | | | | | |
| ENG | LEWOOD FL 34223 | | | | 84 | City | | 85 | Zip C | ode | |
|) | | | | į | | • | <u> </u> | ₽·L., ∖ | 1 | | |
| 11. Pursuant | to the provisions of Sections 607.050 | 2 and 6 | 07.1508, Florida Statut | es, the al | ove- | named corpo | oration submits this statement for the purp | ose of chan | ging its i | registered | |
| office or re | egistered agent, or both, in the State m familiar with, and accept the obliga | of Flore tions of | da. Such change was a . Section 607.0505. Flo | iuthorized irida Stati | oy tn ıtes. | ne corporatio | on's board of directors. I hereby accept the | e appointmen | iii as ieg | Jisterou | |
| - | | | | | | | | | | | |
| SIGNATURE | Signature, typed or printed name of registered age | nt and title | if applicable. (NOTE | Penistered | Acent e | signature required | d when reinstating) | DATE | | | |
| | | | ii application (112.2 | registered | rigent a | | | | | | |
| 12. | OFFICERS AN | ID DIRE | CTORS | 13. | rigent a | | ADDITIONS/CHANGES TO OFFICE | ERS AND DI | | | |
| TITLE | OFFICERS AN | ID DIRE | :`_ | | | | | ERS AND DI | RECTO! Change | RS IN 12 | |
| <u> </u> | | ID DIRE | CTORS | 13. | LE | | | ERS AND DI | | | |
| TITLE | DP | | CTORS | 13. 1.1 π 1.2 N/ | LE ME | ODRESS | | ERS AND DI | | | |
| TITLE NAME | DP Batsel, C. Guy | | CTORS | 13. 1.1 TT 1.2 NA 1.3 ST | LE ME | DODRESS | | ERS AND DI | Change | Addition | |
| TITLE NAME STREET ADDRESS | DP Batsel, C. Guy 1861 Placida Road, Ste 20 | | CTORS | 13. 1.1 TT 1.2 NA 1.3 ST | LE ME REET A Y-ST-2 | DODRESS | | ERS AND DI | | | |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | DP BATSEL, C. GUY 1861 PLACIDA ROAD, STE 20 ENGLEWOOD FL DVST | | CTORS | 13. 1.1 TH 1.2 NA 1.3 ST 1.4 CH | LE ME REET A IY-ST-2 | DODRESS | | ERS AND DI | Change | Addition | |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE | DP BATSEL, C. GUY 1861 PLACIDA ROAD, STE 20 ENGLEWOOD FL | | CTORS | 13. 1.1 TT 1.2 NA 1.3 ST 1.4 CT 2.1 TT 2.2 NA | LE ME REET A TY-ST-2 LE ME | DODRESS | | ERS AND DI | Change | Addition | |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS | DP BATSEL, C. GUY 1861 PLACIDA ROAD, STE 20 ENGLEWOOD FL DVST LORICCO, CARLO J. | | CTORS | 13. 1.1 TH 1.2 NA 1.3 ST 1.4 CF 2.1 TH 2.2 NA 2.3 ST | LE ME REET A TY-ST-2 LE ME | NODRESS ZIP | | ERS AND DI | Change | Addition Addition | |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME | DP BATSEL, C. GUY 1861 PLACIDA ROAD, STE 20 ENGLEWOOD FL DVST LORICCO, CARLO J. 3005 CARING WAY | | CTORS DELETE DELETE | 13. 1.1 TH 1.2 NA 1.3 ST 1.4 CF 2.1 TH 2.2 NA 2.3 ST | LE ME REET A Y-ST-2 LE ME REET A | NODRESS ZIP | | ERS AND DI | Change | Addition | |
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14. 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 annual report or suppliemental annual 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 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an adactment with an address with all other like empowered.

CITY-ST-ZIP