

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

FILED  
May 20 1998 8:00am  
Secretary of State

PROFIT  
CORPORATION  
ANNUAL REPORT  
1998



FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # P93000036637 (5)

1. Corporation Name

WESTBROOKE AT SPRING VALLEY, INC.



Principal Place of Business

Mailing Address

9350 SUNSET DRIVE  
100  
MIAMI FL 33173  
US

9350 SUNSET DRIVE  
100  
MIAMI FL 33173  
US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

05/19/1993

4. FEI Number

65-0418787

Applied For

Not Applicable

5. Certificate of Status Desired

☐ \$8.75 Additional  
Fee Required

6. Election Campaign Financing  
Trust Fund Contribution

☐ \$5.00 May Be  
Added to Fees

8. This corporation owes or has paid the current year Intangible  
Personal Property Tax due June 30.

☐ Yes ☐ No

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip

24 Country

28 Zip

29 Country

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

ROBBINS, CHARLES D ESQU  
900 SUN BANK BUILDING  
777 BRICKELL AVENUE  
MIAMI FL 33131

81 Name

Corporation Service Co.

82 Street Address (P.O. Box Number is Not Acceptable)

1001 Hayes St.

83

84 City

Tallahassee

FL

85 Zip Code

32301

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE DP  
NAME CARR, JAMES  
STREET ADDRESS 9350 SUNSET DRIVE, SUITE 100  
CITY-ST-ZIP MIAMI FL

TITLE VTS  
NAME EISENACHER, L. HAROLD  
STREET ADDRESS 9350 SUNSET DRIVE, SUITE 100  
CITY-ST-ZIP MIAMI FL

TITLE VA  
NAME CHERNYS, LEONARD  
STREET ADDRESS 9350 SUNSET DRIVE, SUITE 100  
CITY-ST-ZIP MIAMI FL

TITLE VA  
NAME MEDLECOT, RICHARD  
STREET ADDRESS 9350 SUNSET DRIVE, SUITE 100  
CITY-ST-ZIP MIAMI FL

TITLE VA  
NAME IBARRIA, DIANA  
STREET ADDRESS 9350 SUNSET DRIVE, SUITE 100  
CITY-ST-ZIP MIAMI FL

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

1.1 TITLE  
1.2 NAME  
1.3 STREET ADDRESS  
1.4 CITY-ST-ZIP

2.1 TITLE  
2.2 NAME  
2.3 STREET ADDRESS  
2.4 CITY-ST-ZIP

3.1 TITLE  
3.2 NAME  
3.3 STREET ADDRESS  
3.4 CITY-ST-ZIP

4.1 TITLE  
4.2 NAME  
4.3 STREET ADDRESS  
4.4 CITY-ST-ZIP

5.1 TITLE  
5.2 NAME  
5.3 STREET ADDRESS  
5.4 CITY-ST-ZIP

6.1 TITLE  
6.2 NAME  
6.3 STREET ADDRESS  
6.4 CITY-ST-ZIP

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 supplemental 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 attachment with an address.

SIGNATURE:

Harold L. Eisenacher

4/27/98

(305) 595-3081

CR2E034 (10/97)