

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

CORPORATION
ANNUAL REPORT
1995



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

APPROVED
AND
FILED

95 APR 25 AM 8:39

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **P93000045530 (1)**

1. Corporation Name
WESTVIEW APARTMENTS OF DAVIE, INC.

Principal Place of Business Mailing Address
**C/O SHIRLEY D WEISMAN PA
800 CORPORATE DRIVE SUITE 510
FT. LAUDERDALE FL 33334**

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified **06/15/1993** 3a. Date of Last Report **05/01/1994**
4. FEI Number **65-0420240** 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 has liability for unpayable tax under 5. 189.032, Florida Statutes Yes No

2. Principal Place of Business 2a. Mailing Address
21 **5060 SW 64th Ave** 26 **5060 SW 64th Ave**
Suite, Apt. #, etc. Suite, Apt. #, etc.
22 **#114** 27 **#114**
City & State City & State
23 **Davie Florida** 28 **Davie, Florida**
Zip Country Zip Country
24 **33314** 25 **Broward** 29 **33314** 30 **Broward**

9. Name and Address of Current Registered Agent
**LANGLEY, MARCIA H
C/O SHIRLEY D WEISMAN PA
800 CORPORATE DRIVE SUITE 510
FT. LAUDERDALE FL 33334**

10. Name and Address of New Registered Agent
81 Name **R. Jeffrey Langley**
82 Street Address (P.O. Box Number is Not Acceptable) **5060 SW 64th Ave**
83 **#114**
84 City **Davie** FL 85 Zip Code **33314**

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]* DATE **4/20/95**
Signature typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when re-registering)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE NAME STREET ADDRESS CITY, ST, ZIP	D LANGLEY, R. JEFFREY 800 CORPORATE DRIVE SUITE 510 FT. LAUDERDALE FL 33334	11 TITLE 12 NAME 13 STREET ADDRESS 14 CITY, ST, ZIP	Director & President LANGLEY, R. JEFFREY 5060 SW 64th Ave #114 Davie, Florida 33314 <input checked="" type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY, ST, ZIP		21 TITLE 22 NAME 23 STREET ADDRESS 24 CITY, ST, ZIP	Vice President & Director LANGLEY, MARCIA 5060 SW 64th Ave #114 Davie, FL 33314 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY, ST, ZIP		31 TITLE 32 NAME 33 STREET ADDRESS 34 CITY, ST, ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY, ST, ZIP		41 TITLE 42 NAME 43 STREET ADDRESS 44 CITY, ST, ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY, ST, ZIP		51 TITLE 52 NAME 53 STREET ADDRESS 54 CITY, ST, ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY, ST, ZIP		61 TITLE 62 NAME 63 STREET ADDRESS 64 CITY, ST, ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 110.07(3)(b), 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: *[Signature]* DATE **2/7/95** **797 0012**
Signature typed or printed name of signing officer or director