# 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

DOCUMENT # **P94000055539 (8)**

1. Corporation Name

**WESTBROOKE AT WINSTON PARK, INC.**

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

95 MAR 31 AM 10:59

| Principal Place of Business | Mailing Address |
|---|---|
| 9040 SUNSET DRIVE<br>SUITE 15<br>MIAMI FL 33173 | 9040 SUNSET DRIVE<br>SUITE 15<br>MIAMI FL 33173 |

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: **07/25/1994**
3a. Date of Last Report:

2. Principal Place of Business — 21:
2a. Mailing Address — 26:
Suite, Apt. #, etc. — 22:
Suite, Apt. #, etc. — 27:
City & State — 23:
City & State — 28:
Zip — 24: Country — 25:
Zip — 29: Country — 30:

4. FEI Number: 65-0520171 ☐ 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 intangible tax under S. 199.032, Florida Statutes ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

**ROBBINS, CHARLES D ESQ.**
**BLACKWELL & WALKER**
**ONE S.E. 3RD AVENUE, 24TH FLOOR**
**MIAMI FL 33131**

10. Name and Address of New Registered Agent

81 Name: Robbins, Charles D. Esq
82 Street Address (P.O. Box Number is Not Acceptable): Blackwell, Walker
83: 2500 SunBank Int'l Center
84 City: One S.E. Third Avenue — FL — 85 Zip Code: 33131
Miami

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: Charles D. Robbins — DATE: 3/17/95
Signature, type or print name of registered agent and title if applicable. NOTE: Registered Agent signature required when name/address

| 12. OFFICERS AND DIRECTORS | | 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 | |
|---|---|---|---|
| TITLE | D | 11 TITLE | ☐ Change ☐ Addition |
| NAME | CARR, JAMES | 12 NAME | |
| STREET ADDRESS | 9040 SUNSET DRIVE, SUITE 15 | 13 STREET ADDRESS | |
| CITY-ST-ZIP | MIAMI FL 33173 | 14 CITY-ST-ZIP | |
| TITLE | V. | 21 TITLE | ☐ Change ☒ Addition |
| NAME | STONE, BOB | 22 NAME | |
| STREET ADDRESS | 9040 Sunset Drive, #15 | 23 STREET ADDRESS | |
| CITY-ST-ZIP | Miami, FL. 33131 | 24 CITY-ST-ZIP | |
| TITLE | VAS | 31 TITLE | ☐ Change ☒ Addition |
| NAME | CHERNYS, LEONARD | 32 NAME | |
| STREET ADDRESS | 9040 Sunset Drive, #15 | 33 STREET ADDRESS | |
| CITY-ST-ZIP | Miami, FL. 33173 | 34 CITY-ST-ZIP | |
| TITLE | VTS | 41 TITLE | ☐ Change ☒ Addition |
| NAME | EISENACHER, L. Hl. | 42 NAME | |
| STREET ADDRESS | 9040 SUNSET DRIVE, #15 | 43 STREET ADDRESS | |
| CITY-ST-ZIP | Miami, FL. 33173 | 44 CITY-ST-ZIP | |
| TITLE | VAS | 51 TITLE | ☐ Change ☒ Addition |
| NAME | IBARRIA, DIANA | 52 NAME | |
| STREET ADDRESS | 9040 Sunset Drive, #15 | 53 STREET ADDRESS | |
| CITY-ST-ZIP | Miami, FL. 33131 | 54 CITY-ST-ZIP | |
| TITLE | VAS | 61 TITLE | ☐ Change ☒ Addition |
| NAME | NEDLECOT, RICHARD | 62 NAME | |
| STREET ADDRESS | 9040 Sunset Drive, #15 | 63 STREET ADDRESS | |
| CITY-ST-ZIP | Miami, FL. 33173 | 64 CITY-ST-ZIP | |

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 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:** — 3-16-95
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date
Harold L. Eisenacher

0100300 CP