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

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P98000028007

WEST LAKE ESTATES PR								
Principal Place of Business	Mailing Address							
735 N. THORNTON AVENUE 735 N. THORNTON AVENUE ORLANDO FL 32803 ORLANDO FL 32803								•
ONEMBO TE SESOV						VRITE IN THIS	SPACE	
					 Date Incorporated or Quality 03/25/1998 	ied		
2. Principal Place of Business	2a. Mailing Address				4. FEI Number		<u> </u>	plied For
H	26				59-3505089			ot Applicable
Suite, Apt. #, etc.	Suite, Apt. #, etc.				5. Certifcate of Status Desired	d 🗇	⊅o./ ⊃ <i>F</i> Fee Re	Additional equired
City & State	City & State			-	6. Election Campaign Financi		\$5.00	<u> </u>
¬ ′	28				Trust Fund Contribution	''g. 🗆	Added t	, ,
Zip Countr		Country			8. This corporation owes the	current year Int	angible	
25	29 3	0			Personal Property Tax.		Yes	□No
	ess of Current Registered Agent			1	0. Name and Address of Ne	w Registered	Agent	
		81	Name					
PIERMONT, SUNIA D	a 12°	82	Street	Address	(P.O. Box Number is Not Acc	eptable)		
735 N. THORNTON AVEN	NUE							
ORLANDO FL 32803		. 83	,		•, • • ,	13.5 65.3		
	1	84	City		<u> </u>	- · · · ·	85 Zip (Code
	ctions 607.0502 and 607.1508, Florida Statutes					F L	shanging its	registered
agent. I am familiar with, and acc	tions 607,0002 and 607,1006, Findia Statutes, in the State of Florida. Such change was authority the obligations of, Section 607,0505, Florid of registered agent and title if applicable. (NOTE: Re	norized by la Statutes		_		DATE DATE		
	OFFICERS AND DIRECTORS	13.			ADDITIONS/CHANGES TO	OFFICERS AN	ID DIRECTO	RS IN 12
TITLE	☐ DELETE	1.1 TITLE		P/D			Change	★ Addition
NAME		1.2 NAME		Sun	ia Piermont			
STREET ADDRESS		1.3 STREET	ADDRESS	735	North Thornt	on Aver	nue	
CITY-ST-ZIP		1.4 CITY-S	T-ZIP	Orl	ando, Florida	32803		- Addition
TITLE	☐ DELETE	2.1 TITLE		ļ			Change	☐ Addition
NAME		2.2 NAME						
STREET ADDRESS		2.3 STREE	TADORESS	1				
CITY-ST-ZIP	□ DELETE	2. 4 CITY- S	T-ZIP	 			Change	Addition
TITLE	☐ DELETE	3.1 TITLE					Gridingo	
NAME		3.2 NAME		.				
STREET ADDRESS			T ADDRESS	<u>`</u>				ļ
CITY-ST-ZIP TITLE	☐ DELETE	3.4. CITY-9 4.1 TITLE	SI-ZIP	<u> </u>		<u>~</u>	Change	Addition
NAME		4. 2 NAME						
STREET ADDRESS			T ADDRESS	;				ì
CITY-ST-ZIP		4.4 CITY-S						
TITLE	☐ DELETE	5.1 TITLE					☐ Change	Addition
NAME		5.2 NAME						
STREET ADDRESS		5.3 STREE	T ADDRESS	3				
CITY-ST-ZIP		5.4 CITY-S	T-ZIP					
TITLE	☐ DELETE	6.1 TITLE			1.33/13/1.	u	Change	Addition
NAME		6.2 NAME			the second second	4		•
STREET ADDRESS		6.3 STREE	TADDRESS	3				

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 receive or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 13 if changed or on an attachment with an address, with all/other like empowered.

West Lake Estates Properties, Inc.

2/2/99 (407)228-4645

6.4 CITY-ST-ZIP

CITY-ST-ZIP

(407)228-4645

Mar 01, 1999 8:00 am Secretary of State

03-01-1999 90097 013 ***150.00