

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # S22482

1. Entity Name

WESTBURY GATEWAY, INC.

FILED

Feb 13, 2001 8:00 am
Secretary of State

02-13-2001 90571 029 ***150.00

Principal Place of Business

2200 GORDON DRIVE
NAPLES FL 34102
US

Mailing Address

2200 GORDON DRIVE
NAPLES FL 34102

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number 65-0248729

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

BOND SCHOENECK & KING

1167 THIRD STREET SOUTH 4001 TAMIAHI TRAIL NORTH
NAPLES FL 34103-3555 STE 400

Name

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

City

FL

Zip Code

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its intangible
Tax filing requirement and elects to do so.
(See criteria on back) ☐

FILE NOW!!! FEE IS \$150.00
After MAY 1, 2001 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE DV
NAME MARTYN, ROBERT W
STREET ADDRESS 11 VICTORIA STREET
CITY-ST-ZIP HAMILTON HMEX BERMUDA ☐ Delete

TITLE DP
NAME DEGROOTE, MICHAEL H
STREET ADDRESS 1100 BURLOAK DR. BURLINGTON ONTARIO
CITY-ST-ZIP CANADA L7L6B2 ☐ Delete

TITLE DV
NAME DEGROOTE, GARY W
STREET ADDRESS 1455 LAKESHORE RD STE 201N BURLINGTON ONTARIO
CITY-ST-ZIP CANADA L7S2J1 ☐ Delete

TITLE DVS
NAME PEKARUK, JERRY
STREET ADDRESS 1100 BURLOAK DR. BURLINGTON ONTARIO
CITY-ST-ZIP CANADA L7L6B2 ☐ Delete

TITLE VS
NAME SEXTON, DAVID N
STREET ADDRESS 1167 THIRD ST S
CITY-ST-ZIP NAPLES FL ☐ Delete

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☒ Change ☐ Addition
NAME
STREET ADDRESS 1111 INTERNATIONAL BLVD.
CITY-ST-ZIP BURLINGTON, ON L7L 6W1

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☒ Change ☐ Addition
NAME
STREET ADDRESS 1111 INTERNATIONAL BLVD.
CITY-ST-ZIP BURLINGTON, ON L7L 6W1

TITLE ☒ Change ☐ Addition
NAME
STREET ADDRESS 4001 TAMIAHI TRAIL NORTH, STE. 400
CITY-ST-ZIP NAPLES, FL. 34103-3555

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

13. 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 report or supplemental 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Jerry Pekaruk JERRY PEKARUK
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

FEB 5 2001
Date

941-262-3214
Daytime Phone #

0393073

CR2E034 (10/00)