

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Feb 10, 2003 8:00 am
Secretary of State

02-10-2003 90398 003 ***150.00

DOCUMENT # S59059

1. Entity Name
WESTBURY PALISADES, INC.



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 **65-0406529**

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

☒ CHECK HERE IF MAKING CHANGES

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**BOND, SCHOENECA & KING P.A.
4001 TAMIAMI TRAIL NORTH
SUITE 250
NAPLES FL 34103-3555**

Name **BOND, SCHOENECA & KING PA**

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$150.00

After May 1, 2003 Fee will be \$550.00

Make Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE **DP** ☐ Delete
NAME **DEGROOTE, MICHAEL H.**
STREET ADDRESS **1111 INTERNATIONAL BLVD.**
CITY-ST-ZIP **BURLINGTON ON L2L6W1**

TITLE ☒ Change ☐ Addition
NAME **BURLINGTON ON CANADA L7L6W1**

TITLE **DVS** ☐ Delete
NAME **PEKARUK, JERRY**
STREET ADDRESS **1111 INTERNATIONAL BLVD.**
CITY-ST-ZIP **BURLINGTON ON L2L6W1**

TITLE ☒ Change ☐ Addition
NAME **BURLINGTON ON CANADA L7L6W1**

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

TITLE ☐ Change ☐ Addition
NAME **BURLINGTON ON CANADA L7L6W1**

TITLE **VD** ☐ Delete
NAME **MARTYN, ROBERT W**
STREET ADDRESS **11 VICTORIA ST**
CITY-ST-ZIP **HAMILTON HM EX BERMUDA**

TITLE ☐ Change ☐ Addition
NAME **BURLINGTON ON CANADA L7L6W1**

TITLE **V** ☐ Delete
NAME **SEXTON, DAVID N**
STREET ADDRESS **4001 TAMIAMI TRAIL NORTH, STE 400**
CITY-ST-ZIP **NAPLES FL 34103-3555**

TITLE ☒ Change ☐ Addition
NAME **4001 TAMIAMI TRAIL NORTH, STE 250**

TITLE ☐ Delete
NAME **SEXTON, DAVID N**
STREET ADDRESS **4001 TAMIAMI TRAIL NORTH, STE 400**
CITY-ST-ZIP **NAPLES FL 34103-3555**

TITLE ☐ Change ☐ Addition
NAME **4001 TAMIAMI TRAIL NORTH, STE 250**

12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

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

JAN. 22, 2003
Date

239-262-3214
Daytime Phone #

CR2E034 (10/02)