

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
May 06, 2002 8:00 am
Secretary of State

05-06-2002 90186 027 ***150.00

DOCUMENT # V21084

1. Entity Name

WESTBROOKE AT WEST LAKE, INC.

Principal Place of Business

**9350 SUNSET DRIVE
 SUITE 100
 MIAMI FL 33173
 US**

Mailing Address

**9350 SUNSET DRIVE
 SUITE 100
 MIAMI FL 33173
 US**

040023



DO NOT WRITE IN THIS SPACE

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

65-0381823

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
 Fee Required

6. Name and Address of Current Registered Agent

**KEAN, MICHAEL
 2101 W COMMERCIAL BLVD 4100
 FORT LAUDERDALE FL 33309**

7. Name and Address of New Registered Agent

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, 2002 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

TITLE	D	<input checked="" type="checkbox"/> Delete
NAME	STENGOS, ANDREAS	
STREET ADDRESS	20 SOLOMOU ST ALIMOS	
CITY-ST-ZIP	174 56 ATHENS GREECE	
TITLE	V	<input checked="" type="checkbox"/> Delete
NAME	CHERNYS, LEONARD	
STREET ADDRESS	9350 SUNSET DR 100	
CITY-ST-ZIP	MIAMI FL	
TITLE	V	<input checked="" type="checkbox"/> Delete
NAME	IBARRIA, DIANA	
STREET ADDRESS	9350 SUNSET DR 100	
CITY-ST-ZIP	MIAMI FL	
TITLE	P	<input type="checkbox"/> Delete
NAME	CARR, JAMES	
STREET ADDRESS	9350 SUNSET DR 100	
CITY-ST-ZIP	MIAMI FL 33173	
TITLE	VS	<input type="checkbox"/> Delete
NAME	EISENACHER, HAROLD	
STREET ADDRESS	9350 SUNSET DR 100	
CITY-ST-ZIP	MIAMI FL 33173	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	T	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Claudia E. Feldman	
STREET ADDRESS	9350 Sunset Drive #100	
CITY-ST-ZIP	Miami, FL 33173	
TITLE	S	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Clay A. Halvorsen	
STREET ADDRESS	15326 Alton Parkway	
CITY-ST-ZIP	Irvine, CA 92618	
TITLE	D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Stephen J. Scarborough	
STREET ADDRESS	15326 Alton Parkway	
CITY-ST-ZIP	Irvine, CA 92618	
TITLE	D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Michael C. Cortney	
STREET ADDRESS	15326 Alton Parkway	
CITY-ST-ZIP	Irvine, CA 92618	
TITLE	V	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	Harold L. Eisenacher	
STREET ADDRESS	9350 Sunset Drive #100	
CITY-ST-ZIP	Miami, FL 33173	
TITLE	D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Andrew H. Parnes	
STREET ADDRESS	15326 Alton Parkway	
CITY-ST-ZIP	Irvine, CA 92618	

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

949-789-1618

CR2E034 (9/01)