

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

FILED
Apr 26, 1999 8:00 am
Secretary of State

04-26-1999 90177 035 ***150.00

DOCUMENT # V61369

1. Corporation Name

WESTBROOK ISLES CORPORATION

Principal Place of Business

3350 NW ROYAL OAK DRIVE
JENSEN BEACH FL 34957
US

Mailing Address

3350 NW ROYAL OAK DRIVE
JENSEN BEACH FL 34957
US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

09/02/1992

4. FEI Number

65-0354834

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 owes the current year intangible
Personal Property Tax.

☐ Yes

☐ No

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip

Country

28 Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

DOSS, ARDEN JR
7500 RESERVE BLVD
PORT ST LUCIE FL 34986

81 Name

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

83 3350 NW ROYAL OAK DRIVE

84 City JENSEN BEACH FL

85 Zip Code 34957

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

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE PD ☐ DELETE

NAME DOSS, ARDEN JR
STREET ADDRESS 7500 RESERVE BLVD
CITY-ST-ZIP PORT ST LUCIE FL

1.1 TITLE ☒ Change ☐ Addition

1.2 NAME
1.3 STREET ADDRESS 3350 NW ROYAL OAK DRIVE
1.4 CITY-ST-ZIP JENSEN BEACH, FL 34957

TITLE STD ☐ DELETE

NAME DOSS, RENEE MOTTRAM
STREET ADDRESS 7500 RESERVE BLVD
CITY-ST-ZIP PORT ST LUCIE FL

2.1 TITLE ☒ Change ☐ Addition

2.2 NAME
2.3 STREET ADDRESS 3350 NW ROYAL OAK DRIVE
2.4 CITY-ST-ZIP JENSEN BEACH, FL 34957

TITLE ST ☐ DELETE

NAME ROWE, RHONDA S
STREET ADDRESS 7500 RESERVE BLVD
CITY-ST-ZIP PORT ST. LUCIE FL

3.1 TITLE ☒ Change ☐ Addition

3.2 NAME
3.3 STREET ADDRESS 3350 NW ROYAL OAK DRIVE
3.4 CITY-ST-ZIP JENSEN BEACH, FL 34957

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.073(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, with a holder like empowered.

SIGNATURE:

Rhonda S Rowe
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/22/99

Date

(561) 692-7800

Daytime Phone #

CR2E034 (11/98)

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