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**Mar 05 1998 8:00am
Secretary of State**

NONPROFIT CORPORATION ANNUAL REPORT 1998



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 717180 (4)

PENTHOUSE HIGHLANDS ASSOCIATION, INC.



Principal Place of Business: **3100 S OCEAN BLVD A1A HIGHLAND BEACH FL 33487**
Mailing Address: **3100 S OCEAN BLVD A1A HIGHLAND BEACH FL 33487**

3. Date Incorporated or Qualified: **09/16/1969**
4. FEI Number: **59-1280362**
5. Certificate of Status Desired: **\$8.75 Additional Fee Required**
6. Election Campaign Financing Trust Fund Contribution: **\$5.00 May Be Added to Fees**
7. Is this nonprofit corporation a homeowners association? Yes No
8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes No

2. Principal Place of Business (21-24) and 2a. Mailing Address (25-30) fields with sub-headers for Suite, City & State, Zip, and Country.

9. Name and Address of Current Registered Agent: **MAGRATH, CAROL, 3100 S OCEAN BLVD, APT 508, HIGHLAND BEACH FL 33487**

10. Name and Address of New Registered Agent (81-85) fields for Name, Street Address, City, and Zip Code.

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, 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 617.0503, Florida Statutes.

SIGNATURE: _____ (NOTE: Registered Agent signature required when reinstating) DATE: _____

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	P	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	KREINBIHL, ARTHUR	1.2 NAME	
STREET ADDRESS	3100 S OCEAN BLVD #614	1.3 STREET ADDRESS	
CITY-ST-ZIP	HIGHLAND BEACH FL	1.4 CITY-ST-ZIP	
TITLE	VP	2.1 TITLE	Vice President D <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	PARASILILI, ANTHONY	2.2 NAME	William F. Lichte
STREET ADDRESS	3100 S OCEAN BLVD #622	2.3 STREET ADDRESS	3100 S. Ocean Blvd. # 516
CITY-ST-ZIP	HIGHLAND BEACH FL	2.4 CITY-ST-ZIP	Highland Beach, FL
TITLE	S	3.1 TITLE	Secretary/Treasurer <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	MCGRATH, CAROL	3.2 NAME	
STREET ADDRESS	3100 S OCEAN BLVD #508	3.3 STREET ADDRESS	
CITY-ST-ZIP	HIGHLAND BEACH FL	3.4 CITY-ST-ZIP	
TITLE	T	4.1 TITLE	Vice President D <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	VOLLMER, DAVID	4.2 NAME	
STREET ADDRESS	3100 S OCEAN BLVD #114	4.3 STREET ADDRESS	
CITY-ST-ZIP	HIGHLAND BEACH FL	4.4 CITY-ST-ZIP	
TITLE	D	5.1 TITLE	Director D <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	GAFFEY, PETER	5.2 NAME	Anthony Ciafardini
STREET ADDRESS	3100 S OCEAN BLVD #404	5.3 STREET ADDRESS	3100 S. Ocean Blvd. # 504
CITY-ST-ZIP	HIGHLAND BEACH FL	5.4 CITY-ST-ZIP	Highland Beach, FL
TITLE	D	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	HANLON, DON	6.2 NAME	
STREET ADDRESS	3100 S OCEAN BLVD #314	6.3 STREET ADDRESS	
CITY-ST-ZIP	HIGHLAND BCH FL	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 119.07(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 receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: _____

CFR2E037 (10/97)

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