


**FILE NOW: FILING FEE IS \$61.25**

**FILED**

**Feb 09 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 # 717291 (9)**

1. Corporation Name  
**HAMPTON HOUSE OF NORTH PALM BEACH CONDOMINIUM ASSOCIATION, INC.**



Principal Place of Business: **124 SHORE COURT NORTH PALM BEACH FL 33408**

Mailing Address: **124 SHORE COURT NORTH PALM BEACH FL 33408**

3. Date Incorporated or Qualified: **10/06/1969**

4. FEI Number: **59-1956821**

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 Mailing Address (2a-24) fields with sub-fields for Suite, City & State, Zip, and Country.

9. Name and Address of Current Registered Agent: **ZAMMIT, PHILIP E, 124 SHORE COURT, #309, NORTH PALM BEACH FL 33408**

10. Name and Address of New Registered Agent (81-85) fields.

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

TITLE	PD	<input type="checkbox"/> DELETE
NAME	PAPES, EDWARD	
STREET ADDRESS	124 SHORE CT. #110	
CITY-ST-ZIP	N. PALM BEACH FL 33408	
TITLE	VD	<input type="checkbox"/> DELETE
NAME	HEITZ, CARLOS	
STREET ADDRESS	124 SHORE CT. #208	
CITY-ST-ZIP	N. PALM BEACH FL 33408	
TITLE	SD	<input type="checkbox"/> DELETE
NAME	ZAMMIT, PHILIP E	
STREET ADDRESS	124 SHORE CT. #309	
CITY-ST-ZIP	N. PALM BEACH FL 33408	
TITLE	D	<input type="checkbox"/> DELETE
NAME	PERSICO, ANTHONY	
STREET ADDRESS	124 SHORE CT. #203	
CITY-ST-ZIP	N. PALM BEACH FL 33408	
TITLE	D	<input type="checkbox"/> DELETE
NAME	SOLOMOM, DAVID	
STREET ADDRESS	124 SHORE COURT, #109	
CITY-ST-ZIP	N. PALM BEACH FL	
TITLE	D VP.	<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY-ST-ZIP	
2.1 TITLE	TREASURER / DIRECTOR <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	SAME
2.3 STREET ADDRESS	
2.4 CITY-ST-ZIP	
3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY-ST-ZIP	
4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY-ST-ZIP	
5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY-ST-ZIP	
6.1 TITLE	VP. DIRECTOR <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
6.2 NAME	MC ANELLY RON
6.3 STREET ADDRESS	124 SHORE CT # 105
6.4 CITY-ST-ZIP	N. PALM BEACH FL 33408

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: *Philip E. Zammit* **Philip E. Zammit Sec 11/20/98 561-588-7853**

CR2E037 (10/97)