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NONPROFIT CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
 Secretary of State
 DIVISION OF CORPORATIONS

DOCUMENT # 717291

1. Corporation Name

HAMPTON HOUSE OF NORTH PALM BEACH CONDOMINIUM ASSOCIATION, INC.

10U411-90176-48

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

Mailing Address
 124 SHORE COURT
 NORTH PALM BEACH FL 33408



2. Principal Place of Business

2a. Mailing Address

3. Date Incorporated or Qualified
 10/06/1969

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

4. FEI Number
 59-1956821

Applied For
 Not Applicable

23 City & State

27 City & State

5. Certificate of Status Desired \$8.75 Additional Fee Required

24 Zip Country

28 Zip Country

6. Election Campaign Financing Trust Fund Contribution \$5.00 May Be Added to Fees

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

ZAMMIT, PHILIP E
 124 SHORE COURT, #309
 NORTH PALM BEACH FL 33408

81 Name

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

83

84 City

FL

85 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

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 PAPES, EDWARD
 STREET ADDRESS 124 SHORE CT. #110
 CITY-ST-ZIP N. PALM BEACH FL 33408

1.1 TITLE Change Addition
 1.2 NAME VPD
 1.3 STREET ADDRESS VESTA BETANCOURT
 1.4 CITY-ST-ZIP 124 SHORE CT. #303
 NPALM BEACH, FL 33408

TITLE TD DELETE
 NAME HEITZ, CARLOS
 STREET ADDRESS 124 SHORE CT. #206
 CITY-ST-ZIP N. PALM BEACH FL 33408

2.1 TITLE Change Addition
 2.2 NAME
 2.3 STREET ADDRESS
 2.4 CITY-ST-ZIP

TITLE SD DELETE
 NAME ZAMMIT, PHILIP E
 STREET ADDRESS 124 SHORE CT. #309
 CITY-ST-ZIP N. PALM BEACH FL 33408

3.1 TITLE Change Addition
 3.2 NAME
 3.3 STREET ADDRESS
 3.4 CITY-ST-ZIP

TITLE D DELETE
 NAME PERSICO, ANTHONY
 STREET ADDRESS 124 SHORE CT. #203
 CITY-ST-ZIP N. PALM BEACH FL 33408

4.1 TITLE Change Addition
 4.2 NAME
 4.3 STREET ADDRESS
 4.4 CITY-ST-ZIP

TITLE D DELETE
 NAME SOLOMOM, DAVID
 STREET ADDRESS 124 SHORE COURT, #109
 CITY-ST-ZIP N. PALM BEACH FL

5.1 TITLE Change Addition
 5.2 NAME
 5.3 STREET ADDRESS
 5.4 CITY-ST-ZIP

TITLE DVP DELETE
 NAME MCANNELLY, RON
 STREET ADDRESS 124 SHORE CT, #105
 CITY-ST-ZIP N PALM BEACH FL 33408

6.1 TITLE Change Addition
 6.2 NAME PD
 6.3 STREET ADDRESS RON MCANNELLY
 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, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

SIGNATURE REQUIRED Philip ZAMMIT 1/14/99 561-842-3339

CR2E037 (11/98)