

FILE NOW: FILING FEE IS \$61.25

FILED  
Apr 10 1997 8:00am  
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT <b>1997</b>		FLORIDA DEPARTMENT OF STATE <b>Sandra B. Mortham</b> Secretary of State DIVISION OF CORPORATIONS
--	---	---

DOCUMENT # **718669** (5)  
1. Corporation Name  
**THE LONGWOOD CONDOMINIUM ASSOCIATION, INC.**

Principal Place of Business <b>11811 AVENUE OF THE P.G.A. PALM BEACH GARDENS FL 33418</b>	Mailing Address <b>11811 AVENUE OF THE P.G.A. PALM BEACH GARDENS FL 33418</b>
--	--



2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified <b>06/12/1970</b>		3a. Date of Last Report <b>04/22/1996</b>	
21 Suite, Apt. #, etc.		26 Suite, Apt. #, etc.		4. FEI Number <b>59-1318740</b>		Applied For <input type="checkbox"/> Not Applicable	
22 City & State		27 City & State		5. Certificate of Status Desired <input type="checkbox"/>		<b>\$8.75</b> Additional Fee Required	
23 Zip		28 Zip		6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>		<b>\$5.00</b> May Be Added to Fees	
24 Country		29 Country		30 Country		8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input type="checkbox"/> Yes <input type="checkbox"/> No	

9. Name and Address of Current Registered Agent				10. Name and Address of New Registered Agent			
<b>FLORENCE MORRIS</b> <b>11811 AVE OF THE PGA</b> <b>PALM BEACH GARDENS FL 33418</b>				81 Name			
				82 Street Address (P.O. Box Number is Not Acceptable)			
				83			
				84 City <b>FL</b> 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	NAME	STREET ADDRESS	CITY-ST-ZIP	1.1 TITLE	1.2 NAME	1.3 STREET ADDRESS	1.4 CITY-ST-ZIP
	PD	FLORENCE MORRIS	11811 AVE OF THE PGA PALM BEACH GRDNS FL				
	VP	STANFORD LEAVITT	11811 AVE OF THE PGA PALM BEACH GRDNS FL	2.1 TITLE	2.2 NAME	2.3 STREET ADDRESS	2.4 CITY-ST-ZIP
	D	RECHT, GLADYS	11811 AVE OF PGA PALM BEACH GRDNS FL	VP	Clyde Measey	11811 Ave of the PGA	Palm Beach Gardens, FL 33418
	D	H. VALECHE	11811 AVE OF PGA PALM BEACH GRDNS FL	D	N. Lee Jebb	11811 Ave of the pga PBG, FL	33418
	T	BRIDGES, PATRICIA	11811 AVE OF PGA PALM BEACH GRDNS FL	Ann Cascio	11811 Ave of the pga PBG, FL	33418	
	S	LILLIAN ARNONE	11811 AVE OF PGA PALM BEACH GARDENS FL				

14. I do 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: SIGNATURE REQUIRED 4/2/97 561 625-7331

CR2E037 (9/96)