

2000 UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 15, 2000 8:00 am
Secretary of State

03-15-2000 90037 008 ****61.25

DOCUMENT # 723772

1. Entity Name

WHITEHALL SOUTH CONDOMINIUM ASSOCIATION, INC

Principal Place of Business

Mailing Address

2800 S. OCEAN BLVD.
 BOCA RATON FL 33432

2800 S. OCEAN BLVD.
 BOCA RATON FL 33432-8332

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

59-1500513

Applied For

Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required



DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

STONE, MYRIAM C
2800 S. OCEAN BLVD.
BOCA RATON FL 33432

Name

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

City

FL

Zip Code

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the state of Florida.

SIGNATURE *Myriam C Stone*

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

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW:
FEE IS \$61.25

9. Election Campaign Financing Trust Fund Contribution.

\$5.00 May Be Added to Fees

Make Check Payable to Department of State

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	T	<input type="checkbox"/> Delete
NAME	TALESNICK, IRVIN	
STREET ADDRESS	2800 S. OCEAN BLVD.	
CITY-ST-ZIP	BOCA RATON FL 33432	
TITLE	VD	<input type="checkbox"/> Delete
NAME	GREENHILL, ROBERT	
STREET ADDRESS	2800 S. OCEAN BLVD.	
CITY-ST-ZIP	BOCA RATON FL 33432	
TITLE	P	<input type="checkbox"/> Delete
NAME	NATKIN, ALVIN M	
STREET ADDRESS	2800 S. OCEAN BLVD.	
CITY-ST-ZIP	BOCA RATON FL 33432	
TITLE	D	<input type="checkbox"/> Delete
NAME	SELMAN, ROBERT	
STREET ADDRESS	2800 S. OCEAN BLVD.	
CITY-ST-ZIP	BOCA RATON FL 33432	
TITLE	D	<input type="checkbox"/> Delete
NAME	BARNES, CHARLES	
STREET ADDRESS	2800 S. OCEAN BLVD.	
CITY-ST-ZIP	BOCA RATON FL 33432	
TITLE	S	<input type="checkbox"/> Delete
NAME	LAZO, LANCE N	
STREET ADDRESS	2800 S. OCEAN BLVD.	
CITY-ST-ZIP	BOCA RATON FL 33432	

TITLE	D	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	LES Karp	
STREET ADDRESS	2800 S. Ocean Blvd	
CITY-ST-ZIP	Boca Raton, FL 33432	
TITLE	D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Kenneth Kearby	
STREET ADDRESS	2800 S. Ocean Blvd	
CITY-ST-ZIP	Boca Raton, FL 33432	
TITLE	D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Stanley Janovici	
STREET ADDRESS	2800 S. Ocean Blvd	
CITY-ST-ZIP	Boca Raton, FL 33432	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	Secretary & Treasurer	
STREET ADDRESS		
CITY-ST-ZIP		

12. 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 report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *Myriam C Stone*
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date: *7 Mar 2000* Daytime Phone #: *561-391-6371*

CR2E037 (9/99)