

FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # 725028 (5)
1. Corporation Name
LE CHATEAU ROYAL CONDOMINIUM ASSOCIATION, INC.



Principal Place of Business: **3540 S OCEAN BLVD. SOUTH PALM BEACH FL 33480**
Mailing Address: **3540 S OCEAN BLVD. SOUTH PALM BEACH FL 33480**

3. Date Incorporated or Qualified: **12/14/1972**
3a. Date of Last Report: **01/27/1995**

2. Principal Place of Business		2a. Mailing Address		4. FEI Number		Applied For	
21		26		59-1502174		Not Applicable	
Suite, Apt. #, etc.		Suite, Apt. #, etc.		5. Certificate of Status Desired		<input type="checkbox"/> \$8.75 Additional Fee Required	
22		27		6. Election Campaign Financing Trust Fund Contribution		<input type="checkbox"/> \$5.00 May Be Added to Fees	
City & State		City & State		8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes		<input type="checkbox"/> Yes <input type="checkbox"/> No	
23		28		24		25	
Zip		Country		29		30	

9. Name and Address of Current Registered Agent				10. Name and Address of New Registered Agent			
HARROW, LEO 3540 S OCEAN BLVD SOUTH PALM BEACH FL 33480				81 Name			
				82 Street Address (P.O. Box Number is Not Acceptable)			
				83			
				84 City			
				Vaisanen, Juha 3540 So. Ocean Blvd. Apt. 916 South Palm Beach FL 33480			

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: *Juha K. Vaisanen* (NOTE: Registered Agent signature required when reinstating) DATE:

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PD	1.1 TITLE	PD
NAME	HARROW, LEO	1.2 NAME	Juha Vaisanen
STREET ADDRESS	3540 S. OCEAN BLVD.	1.3 STREET ADDRESS	3540 So. Ocean Blvd.
CITY-ST-ZIP	S. PALM BEACH FL	1.4 CITY-ST-ZIP	South Palm Beach, FL 33480
TITLE	SD	2.1 TITLE	SD
NAME	PIZZA, JUDITH J	2.2 NAME	Sandy Bonelli
STREET ADDRESS	3540 S. OCEAN BLVD.	2.3 STREET ADDRESS	3540 South Ocean Blvd.
CITY-ST-ZIP	S. PALM BEACH FL	2.4 CITY-ST-ZIP	South Palm Beach, FL 33480
TITLE	TD	3.1 TITLE	
NAME	CANTY, ARLENE	3.2 NAME	
STREET ADDRESS	3540 S OCEAN BLVD	3.3 STREET ADDRESS	
CITY-ST-ZIP	S. PALM BEACH FL	3.4 CITY-ST-ZIP	
TITLE	VD	4.1 TITLE	VD
NAME	OVERALL, MARY	4.2 NAME	Bernice Zimmerman
STREET ADDRESS	3540 S. OCEAN BLVD.	4.3 STREET ADDRESS	3540 So. Ocean Blvd.
CITY-ST-ZIP	S. PALM BEACH FL	4.4 CITY-ST-ZIP	South Palm Beach, FL 33480
TITLE		5.1 TITLE	
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE		6.1 TITLE	
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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: *Juha K. Vaisanen*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E037 (12/95)