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

NONPROFT
CORPORATION
ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State \*\*\*,
DIVISION OF CORPORATIONS

DOCUMENT #
1. Corporation Name

725028

(5)

LE CHATEAU ROYAL CONDOMINIUM ASSOCIATION, INC.

Principal Place of Business		Mailing Address			<u></u>	ENE BADAN BADAN DEBEN BIBAN BADAN BADAN 1881	
3540 S OCEAN BLVD. 3540 S OCEAN SOUTH PALM BEACH FL 33480 SOUTH PALM B			ILVD. ACH FL 33480-5757				
					3. Date Incorporated or Qualified 12/14/1972	3s. Date of Last Report 03/25/1996	
2. Principal Pa	ace of Business	2a. Mailing Address			4. FEI Number	Applied For	
Suite. Apt #, etc.		26 Suite Apt # etc	Suite, Apt. #, etc.		59-1502174	Not Applicable	
Suite, Apr. W, etc.		27 Suite, Apr. #, etc.	_		5. Certificate of Status Desired	\$8.75 Additional Fee Required	
City & State		City & State	<del></del> , ·		6. Election Campaign Financing	\$5.00 May Be	
23		28			Trust Fund Contribution	Added to Fees	
Zip	Country	Zip Country 30		у	8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes		
24	9. Name and Address of Currer				10. Name and Address of New Registered Agent		
81 Namer 1							
					real ander all less (P.O. Box Number is Not Asceptab	<u>e</u> .	
3540 S OCEAN BLVD			0	3546			
ADT 016				3 0	4. 405		
SOUTH PALM BEACH FL 33480				4 City	7: 400	85 Zip Code	
Sauh					th talm 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 of the purpose of ch							
office or registered agent, or both, ip 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 tamplar only and accept the objections of, Section 617.0503, Florida Statutes.							
SIGNATURE Storage typed or printed name of registered agent and title of applicable (NOTE: Registered Agent signature required when reinstating)  DATE							
12.	Signaph, typed or printed name of registered ag-	ent and title if applicable (NO D DIRECTORS	13.	gent signature requ	ADDITIONS/CHANGES TO OFFIC	DATE ERS AND DIRECTORS IN 12	
TOLE	AND STREET	DELETE	1.1 TITLE		GC.	Change Addition	
NAME	VAISANEN, JUHA		1.2 NAM		Friedlander, Yele ssub S. Ockan Blin	, ``	
STREET ADORESS	3540 S. OCEAN BLVD.		1.3 STRE	ET ADDRESS	skyo s. Ocean Blu	1.	
CITY-ST-ZIP	S. PALM BEACH FL		1.4 CITY		south falm Beach,		
TITLE	SD	DELETE	2.1 TITLE		<b>D</b>	Change Addition	
NAME	Bonelli, Sandy		2.2 NAM		Zake, Leore	م الماء	
STREET ADDRESS	3540 S. OCEAN BLVD.		2.3 STRE		540 South Ocea	ا ــــــ ، مفا	
CITY - ST - ZIP	S. PALM BEACH FL	no cre			South Halm Deac	h, F(3848D)	
TITLE	TD OANTY ADJUDIT	DELETE	3.1 TITLE	1, 5	Data Datas	Change	
NAME OTDGET ADDDESS	CANTY, ARLENE 3540 S OCEAN BLVD		3.2 NAM	ET ADDRESS	Delatein, Reach	sive.	
STREET ADDRESS CITY-ST-ZIP	S. PALM BEACH FL		4	1.79	outh Adm Beach	FL 33480	
TITLE	VD VD	DELETE	4,1 TITLE		D CI "	Change Addition	
NAME	ZIMMERMAN, BERNICE		4. 2 NAM		sugas Shally		
STREET ADDRESS	3540 S. OCEAN BLVD.		4.3 STRE	ET ADDRESS	Suo So. Creak (3)	vo-	
CITY-ST-ZIP	S. PALM BEACH FL		4.4 CITY	-ST-ZIP	South from Beach	FT 18348D	
TITLE		☐ DELETE	5.1 TITLE	1	/ D	Change Addition	
NAME			. 5.2 NAM	E   <b>\</b> _	laves, Marquerite		
STREET ADDRESS			5.3 STRE		sty'o so Octon is	lva.	
CITY-ST-ZIP		T priete	5.4 CITY		S.P.B., FI 33480	Channe I Addition	
TITLE		☐ DELETE	6.1 TITLE		<del>-</del> ,	Change Addition	
NAME			6.2 NAM	1			
STREET ADDRESS				ET ADDRESS			
14. I do heret	ov certify that the information supplies	ed with this filing does not gue	6.4 CITY lify for the ex		ed in Section 119.07(3)(i), Florida Statute	s. 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 Change 617, Fierida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.							

SIGNATURE:

GNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Daytime Phone # 0039403

**FILED** 

Feb 26 1997 8:00am

Secretary of State