


**FILED**  
**Mar 24, 1999 8:00 am**  
**Secretary of State**

03-24-1999 90039 019 \*\*\*\*61.25

NONPROFIT CORPORATION ANNUAL REPORT <b>1999</b>		FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State DIVISION OF CORPORATIONS
<b>DOCUMENT # 726348</b> 1. Corporation Name <b>GREENSWARD VILLAGE ONE CONDOMINIUM ASSOCIATION, INC.</b>		
Principal Place of Business 745 GREENSWARD COURT DELRAY BEACH FL 33445		Mailing Address 745 GREENSWARD COURT DELRAY BEACH FL 33445



2. Principal Place of Business	2a. Mailing Address	3. Date Incorporated or Qualified
21 Suite, Apt. #, etc.	26 Suite, Apt. #, etc.	05/06/1973
22 City & State	27 City & State	4. FEI Number
23 Zip	28 Zip	59-1562476
24 Country	29 Country	Applied For
25	30	Not Applicable
9. Name and Address of Current Registered Agent		5. Certificate of Status Desired <input type="checkbox"/> \$3.75 Additional Fee Required
BURSTEIN, RICHARD B. 780 GREENSWARD ST - 830 #1008 H-108 DELRAY BCH FL 33445		6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees

9. Name and Address of Current Registered Agent		10. Name and Address of New Registered Agent	
BURSTEIN, RICHARD B. 780 GREENSWARD ST - 830 #1008 H-108 DELRAY BCH FL 33445		B1 Name	B5 Zip Code
		B2 Street Address (P.O. Box Number is Not Acceptable)	
		B3	
		B4 City	FL

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: Richard B. Burstein (NOTE: Registered Agent signature required when reinstating) DATE: \_\_\_\_\_

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	XX <input type="checkbox"/> DELETE	1.1 TITLE	VICE PRESIDENT <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	TURNER, EDWARD	1.2 NAME	Turner, Edward
STREET ADDRESS	230 GREENSWARD COURT	1.3 STREET ADDRESS	730 Greensward Court
CITY-ST-ZIP	DELRAY BEACH FL 33445	1.4 CITY-ST-ZIP	Delray Beach, FL 33445
TITLE	P <input checked="" type="checkbox"/> DELETE	2.1 TITLE	PRESIDENT <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	SNYDER, E WALTER	2.2 NAME	Richard B. Burstein
STREET ADDRESS	830 GREENSWARD COURT	2.3 STREET ADDRESS	830 Greensward Court
CITY-ST-ZIP	DELRAY BEACH FL 33445	2.4 CITY-ST-ZIP	Delray Beach, FL 33445
TITLE	TR <input checked="" type="checkbox"/> DELETE	3.1 TITLE	TREASURER <input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	ROLAND, GEORGE	3.2 NAME	Edward Lavine
STREET ADDRESS	800 GREENSWARD COURT	3.3 STREET ADDRESS	830 Greensward Court
CITY-ST-ZIP	DELRAY BEACH FL 33445	3.4 CITY-ST-ZIP	Delray Beach, FL 33445
TITLE	PD <input checked="" type="checkbox"/> DELETE	4.1 TITLE	SECRETARY <input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	EISENBERG, ALVIN	4.2 NAME	Evelyn Frankel
STREET ADDRESS	900 GREENSWARD COURT	4.3 STREET ADDRESS	730 Greensward Court
CITY-ST-ZIP	DELRAY BEACH FL 33445	4.4 CITY-ST-ZIP	Delray Beach, FL 33445
TITLE	SD <input type="checkbox"/> DELETE	5.1 TITLE	ASSISTANT SECRETARY <input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	FRANKEL, EVELYN	5.2 NAME	Edward Hughes
STREET ADDRESS	730 GREENSWARD COURT	5.3 STREET ADDRESS	800 Greensward Crt.
CITY-ST-ZIP	DELRAY BEACH FL 33445	5.4 CITY-ST-ZIP	Delray Beach, FL 33445
TITLE	VP <input checked="" type="checkbox"/> DELETE	6.1 TITLE	DIRECTOR <input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	PRUNETTI, CARMEN A.	6.2 NAME	DARREN PANKS
STREET ADDRESS	900 GREENSWARD COURT	6.3 STREET ADDRESS	730 GREENSWARD CRT.
CITY-ST-ZIP	DELRAY BEACH FL 33445	6.4 CITY-ST-ZIP	DELRAY BEACH, FL 33445

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 fees empowered.

SIGNATURE: Richard B. Burstein  
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR  
 Date: \_\_\_\_\_ Daytime Phone #: \_\_\_\_\_

CR2E037 (1/98)