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Feb 24, 1999 8:00 am
Secretary of State

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NONPROFIT CORPORATION ANNUAL REPORT 1999		FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # 731301

1. Corporation Name
LYNDHURST "D" CONDOMINIUM ASSOCIATION, INC.

Principal Place of Business C/O BROFSKY LYNDHURST D 76 DEERFIELD BEACH FL 33442	Mailing Address C/O BROFSKY LYNDHURST D 76 DEERFIELD BEACH FL 33442
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2. Principal Place of Business 21	2a. Mailing Address 26	3. Date Incorporated or Qualified 12/03/1974
22 Lyndhurst D-76 City & State	27 Lyndhurst D-76 City & State	4. FEI Number 59-1916387
23	28	5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required
24	29	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

CONDO OWNERS ORGANIZATION CENTURY VILLAGE
3501 WEST DRIVE
DEERFIELD BEACH FL 33442-2085

10. Name and Address of New Registered Agent

81 Name	85 Zip Code
82 Street Address (P.O. Box Number is Not Acceptable)	
83	
84 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 *[Signature]* DATE **1-7-99**

12. OFFICERS AND DIRECTORS

TITLE	PD	<input type="checkbox"/> DELETE
NAME	BROFSKY, SAM	
STREET ADDRESS	LYNDHURST D-76	
CITY-ST-ZIP	DEERFIELD BEACH FL 33442	
TITLE	VD	<input type="checkbox"/> DELETE
NAME	MARCHESE, CHARLES	
STREET ADDRESS	LYNDHURST D-77	
CITY-ST-ZIP	DEERFIELD BEACH FL	
TITLE	D	<input checked="" type="checkbox"/> DELETE
NAME	HERTZ, SUE	
STREET ADDRESS	LYNDHURST D-79	
CITY-ST-ZIP	DEERFIELD BEACH FL	
TITLE	SD	<input type="checkbox"/> DELETE
NAME	FELD, ELAINE	
STREET ADDRESS	LYNDHURST D-89	
CITY-ST-ZIP	DEERFIELD BCH. FL 33442	
TITLE	TD	<input type="checkbox"/> DELETE
NAME	WAGMAN, DIANE	
STREET ADDRESS	LYNDHURST D-75	
CITY-ST-ZIP	DEERFIELD BCH. FL 33442	
TITLE	D	<input type="checkbox"/> DELETE
NAME	SERMER, VICTOR	
STREET ADDRESS	LYNDHURST D-90	
CITY-ST-ZIP	DEERFIELD BEACH FL 33442	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY-ST-ZIP	
2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY-ST-ZIP	
3.1 TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
3.2 NAME	DIRECTOR
3.3 STREET ADDRESS	LEE LUBIN
3.4 CITY-ST-ZIP	LYNDHURST D-86 DEERFIELD BEACH FL.
4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY-ST-ZIP	
5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY-ST-ZIP	
6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 CITY-ST-ZIP	

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 like empowered.

SIGNATURE *[Signature]* SIGNATURE REQUIRED DATE **1-7-99**

CR2E037 (1/1/98)