FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1997 DOCUMENT #

(6)

NORTHAMPTON F CONDOMINIUM ASSOCIATION, INC.							
Principal Place of Business Maili		Mailing Address			-{ 1780 1	JOO DABAH DIBUK BIBIK BIBIK DIJ	jii 01011 100 1
N HAMPTON F-107 CENTURY VILLAGE WEST PALM BEACH FL 33417-1921 US 107-F NORTHAMPTON WEST PALM BEACH FL 3341 US			3417-7608		·		
		00			3. Date Incorporated or Qualified 04/14/1978	3a. Date of Last Re 01/29/199	∍port)6
Principal Place of Business 2a. Mailing Address				, , ,,,,, ,,,	4. FEI Number	Ap	plied For
		26			59-2200560		t Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc.		5. Certificate of Status Desired	□ \$8.75 A		
City & State		27 City & State		6. Election Campaign Financing	Fee Re		
23		28			Trust Fund Contribution	\$5.00 Added t	
Zip Cauntry		Zip Country		8. This corporation has liability for it			
24 25		29	30			Yes No	
	9. Name and Address of Curre	ent Registered Agent		I NI	10. Name and Address of New Re	pistered Agent	
	140 84 54		81	Name			
WALSH,			62	Street Add	ress (P.O. Box Number is Not Acceptab	le)	
	AMPTON F-107 ALM BCH FL 33409		83				
WEST F	ALM DUTI FL 33408						
			84	City		FL 85 Zip C	Code
11. Pursuant office or ragent. La	to the provisions of Sections 617.05 registered agent, or both, in the Stat m familiar with, and accept the obli	02 and 617.1508, Florida Statu le of Florida. Such change was gations of, Section 617.0503, F	tes, the above authorized by lorida Statutes	e-named corp the corporat s.	poration submits this statement for the p tion's board of directors. I hereby accep	urpose of changing its It the appointment as	s registered registered
SIGNATURE	Signature, typed or printed name of registered a	ONO pent and title it anoticable (NO	TE: Begistered And	ent einnahire renuir	red when reinstating)	DATE	
12.		ND DIRECTORS	13.	on algrana a regan	ADDITIONS/CHANGES TO OFFIC		S IN 12
TITLE	\$ DELETE		1,1 TITLE			Change	Addition
NAME	PFISTER, BARBARA		1.2 NAME				
STREET ADDRESS	NORTHAMPTON F-119		1.3 STREET	ADDRESS			
CITY-ST-ZIP			1.4 CITY - S	ST-ZIP		T Observed	Addition
TITLE	VP	☐ DELETE	2.1 TITLE			Change	Addition
NAME			2.2 NAME 2.3 STREET				
STREET ADDRESS CITY-ST-ZIP	W PALM BCH FL		2.4 CITY-				
TITLE	P	DELETE	3.1 TITLE	01-2"		☐ Change	Addition
NAME	WALSH, VIVIAN		3.2 NAME			-	
STREET ADDRESS	NORTHAMPTON F-107 C V		3.3 STREET	ADDRESS			
CITY-ST-ZIP	W PALM BCH FL		3.4. CITY -	ST-ZiP			
TITLE	D	DELETE	4.1 TITLE			Change	☐ Addition
NAME	HIRSCH, HAROLD						
STREET ADDRESS	NORTHHAMPTON F-109			T ADDRESS			
CITY-ST-ZIP	W PALM BCH FL	DELETE	4.4 CITY - 5	ST-ZIP		Change	Addition
TITLE NAME			5.1 TITLE 5.2 NAME			Change	find renewall
STREET ADDRESS	NORTHAMPTON F-119			T ADORESS			
CITY-ST-ZIP	W. PALM BEACH FL.		5.4 CITY - S				
TITLE	T	DELETE	6.1 TITLE	JI EII	· · · · · · · · · · · · · · · · · · ·	☐ Change	Addition
NAME	CUTUGNO, MARIA		6.2 NAME				_
STREET ADDRESS				T ADDRESS			

6.4 CITY-ST-ZIP 14. I do 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 os trustee empowered to exempte 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.

W. PALM BEACH FL

FILED

Jan 21 1997 8:00am

Secretary of State