

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT


03-27-2007 90001 033 ****61.25

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FILED

07 MAR 30 AM 11:53

SECRETARY OF STATE
TALLAHASSEE, FLORIDA
40041000

DOCUMENT # 742452
1. Entity Name
NORTHAMPTON F CONDOMINIUM ASSOCIATION, INC.



Principal Place of Business
**N HAMPTON F-110
WEST PALM BEACH, FL 33417-7610**

Mailing Address
**N HAMPTON F-110
WEST PALM BEACH, FL 33417-7610 US**

2. Principal Place of Business - No P.O. Box #
N HAMPTON F-118

3. Mailing Address
N HAMPTON F-118

Suite, Apt. #, etc.

City & State
WEST PALM BEACH, FL

City & State
WEST PALM BEACH, FL

Zip
33417-7610

Country
US

03212007 Chg-NP CR2E037 (12/06)

4. FEI Number
59-2200560

Applied For
 Not Applicable

5. Certificate of Status Desired **\$8.75 Additional Fee Required**



6. Name and Address of Current Registered Agent
**POWERS, PAT
110 NORTHAMPTON F
WEST PALM BEACH, FL 33417-7610**

7. Name and Address of New Registered Agent

Name
FELDHAUSEN, THOMAS

Street Address (P.O. Box Number is Not Acceptable)
118 NORTHAMPTON F

City
WEST PALM BEACH, FL

Zip Code
33417-7610

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE *Thomas L. Feldhausen* **THOMAS L. FELDHAUSEN P** **3-22-07**

Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

Filing Fee is **\$61.25**
Due by **May 1, 2007**

9. Election Campaign Financing Trust Fund Contribution. **\$5.00** May Be Added to Fees

Make check payable to **Florida Department of State**

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	P WALSH, VIVIAN 107 NORTHAMPTON F WEST PALM BEACH, FL 334177610	<input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S WUGMAN, RALPH 102 NORTHAMPTON F WEST PALM BEACH, FL 334177610	<input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	BM PFISTER, BARBARA NORTHAMPTON F-119 W PALM BCH, FL 334177610	<input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T POWERS, PAT 110 NORTHAMPTON F W. PALM BEACH, FL 334177610	<input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V BROWN, DAVID 121 NORTHAMPTON F WEST PALM BEACH, FL 334177610	<input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE NAME STREET ADDRESS CITY-ST-ZIP	BM WALSH, VIVIAN 107 NORTHAMPTON F WEST PALM BEACH, FL 334177610	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	BM WUGMAN, RALPH 102 NORTHAMPTON F WEST PALM BEACH, FL 334177610	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V PFISTER, BARBARA 119 NORTHAMPTON F WEST PALM BEACH, FL 334177610	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S FELDHAUSEN, CHRIS 118 NORTHAMPTON F WEST PALM BEACH, FL 334177610	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P/T FELDHAUSEN, THOMAS 118 NORTHAMPTON F WEST PALM BEACH, FL 334177610	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *Thomas L. Feldhausen* **THOMAS L. FELDHAUSEN** **3-22-07** **5614711972**

Signature AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

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