

**FILE NOW: FILING FEE AFTER MAY 1 IS \$155.00**

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AND  
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95 APR 18 AM 8:20

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

CORPORATION  
ANNUAL REPORT  
**1995**



FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State  
DIVISION OF CORPORATIONS

**DOCUMENT # 742461 (7)**

1. Corporation Name

**WINDSOR L CONDOMINIUM ASSOCIATION, INC.**

DO NOT WRITE IN THIS SPACE

Principal Place of Business	Mailing Address
WINDSOR L 258 276 CENTURY VILLAGE WEST PALM BEACH FL 33417	WINDSOR L 258 276 CENTURY VILLAGE WEST PALM BEACH FL 33417

3. Date Incorporated or Qualified <b>04/14/1978</b>	3a. Date of Last Report <b>04/20/1994</b>
4. FEI Number <b>59-1869957</b>	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	<b>\$8.75</b> Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	<b>\$5.00</b> May Be Added to Fees
7. Nonprofit with IRS 501(c)(3) Tax Exempt Status <input type="checkbox"/>	<b>\$68.75</b> Supplemental Fee Not Required
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input type="checkbox"/> Yes <input type="checkbox"/> No	

2. Principal Place of Business	2a. Mailing Address
21 Suite, Apt. #, etc.	26 Suite, Apt. #, etc.
22 City & State	27 City & State
23 Zip Country	28 Zip Country
24	29
25	30

9. Name and Address of Current Registered Agent

**SNOW, ELI  
WINDSOR L 258  
CENTURY VILLAGE  
WEST PALM BEACH FL 33417**

10. Name and Address of New Registered Agent

81 Name	<b>ARTHUR TEITELBAUM, PRES.</b>		
82 Street Address (P.O. Box Number is Not Acceptable)	<b>WINDSOR L 276</b>		
83	<b>CENTURY VILLAGE</b>		
84 City	<b>WEST PALM BEACH</b>	85 State	<b>FL</b>
		86 Zip Code	<b>33417</b>

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, 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 607.0505, Florida Statutes.

SIGNATURE: *Arthur Teitelbaum* **ARTHUR TEITELBAUM, PRES., APR 18, 1995**

12. OFFICERS AND DIRECTORS

TITLE	<b>PD</b>
NAME	<b>SNOW, ELI</b>
STREET ADDRESS	<b>WINDSOR L 258 CEN VILL</b>
CITY, ST, ZIP	<b>W PALM BCH, FL 00000</b>
TITLE	<b>VD</b>
NAME	<b>PODOWSKY, LEO</b>
STREET ADDRESS	<b>WINDSOR L 275 CEN VILL</b>
CITY, ST, ZIP	<b>W PALM BCH, FL 00000</b>
TITLE	<b>TD</b>
NAME	<b>BELLE, RAPHAEL</b>
STREET ADDRESS	<b>WINDSOR L-251 CEN VILL</b>
CITY, ST, ZIP	<b>W. PALM BEACH FL</b>
TITLE	<b>SDA</b>
NAME	<b>KOLSKY, BELLE</b>
STREET ADDRESS	<b>WINDSOR L 260 CEN VILL</b>
CITY, ST, ZIP	<b>W PALM BCH, FL 0</b>
TITLE	<b>SD</b>
NAME	<b>FELDMAN, MORRIS</b>
STREET ADDRESS	<b>WINDSOR L 262 CEN VILL</b>
CITY, ST, ZIP	<b>W PALM BCH, FL 00000</b>
TITLE	<b>SD</b>
NAME	<b>SONLEIDER, ANN</b>
STREET ADDRESS	<b>WINDSOR L-274 CEN DFILL</b>
CITY, ST, ZIP	<b>WEST PALM BCH FL</b>

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE	<b>SD</b>	<input type="checkbox"/> Change <input type="checkbox"/> Addition
12 NAME	<b>LANE, SARAH</b>	
13 STREET ADDRESS	<b>WINDSOR L - 251 CEN VILL</b>	
14 CITY, ST, ZIP	<b>W PALM BEACH FL 00000</b>	
21 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
22 NAME		
23 STREET ADDRESS		
24 CITY, ST, ZIP		
31 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
32 NAME		
33 STREET ADDRESS		
34 CITY, ST, ZIP		
41 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
42 NAME		
43 STREET ADDRESS		
44 CITY, ST, ZIP		
51 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
52 NAME		
53 STREET ADDRESS		
54 CITY, ST, ZIP		
61 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
62 NAME		
63 STREET ADDRESS		
64 CITY, ST, ZIP		

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14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 110.07(3)(b), 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.

SIGNATURE: *Belle Raphael T* **BELLE RAPHAEL T** **4-18-95** **407-478-4361**