FILE NOW: FILING FEE IS \$61.25

NONPROFIT **CORPORATION** ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1998 DOCUMENT #

742481

(5)

NORWICH G CONDOMINIUM ASSOCIATION, INC.

Principal Plac	e of Business	Mailing Address			
NORWICH G 150 NORWICH G 150		NORWICH G 150		3. Date incorporated or Qualified	
W. PALM BEACH FL 33417 W. PALM BEACH FL 3		W. PALM BEACH FL 3341	7	04/14/1978	
-				4. FEI Number Ar	plied For
				65-0045417 No	t Applicable
 	lace of Business	2a. Mailing Address			Additional
Suite, Apt.	# etc	Suite, Apt, #, etc.			equired
22	# ₁ GtG.	27		6. Election Campaign Financing \$5.00 Trust Fund Contribution Added to	
City & Stat	e	City & State		7. is this nonprofit corporation a homeowners associatio	n?
23		28	*** *	Yes ☐ No	
Zip	Country	Zîp	Country	8. This corporation owes or has paid the current year Int	
24	9. Name and Address of Curren	29	30	Personal Property Tax due June 30. Yes 10. Name and Address of New Registered Agent	No
	s. Name and Address of Curren	i negistered Agent	81 Name		
CETTING	CED CLODIA				
GETTINGER, GLORIA NORWICH G 150 CENTURY VILLAGE		82 Stree	t Address (P.O. Box Number is Not Acceptable)		
1	A BEACH FL 33417		83		
	.,		84 City	85 Zip	Code
11. Pursuant	to the provisions of Sections 617.050	2 and 617.1508, Florida Statu	tes, the above-name	d corporation submits this statement for the purpose of changing it orporation's board of directors. I hereby accept the appointment as	s registered registered
agent. I a	m familiar with, and accept the obliga	tions of, Section 617.0503, Fl	orida Statutes.	polation of the graduation in the cappening and appearance are	
SIGNATURE .				rre required when reinstating) DATE	
Signature, typed or printed name of registered agent and title if applicable. (NOTE: I OFFICERS AND DIRECTORS		13.	rre required when reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTOR	S IN 12	
TITLE	PD	DELETE	1.1 TITLE	PRESIDENT Change	Addition
NAME	GETTINGER, GLORIA	•	1.2 NAME	MICHAEL MINDEL	
STREET ADDRESS	NORWICH G 150 CEN VILL		1.3 STREET ADDRESS		
CITY-ST-ZIP	W PALM BCH, FL 00000		1.4 CITY-ST-ZIP	WPB FL 33417	
TITLE	VD	À CDEFELE	2.1 TITLE	VICE - PRESIDENT Change	Addition
NAME	GRUNBAUM, MARTA		2.2 NAME	TOM JEWETT	
STREET ADDRESS	NORWICH G 149 CEN VILL		2.3 STREET ADDRESS	1001-001-001	
CITY-ST-ZIP	W PALM BCH, FL 00000		2. 4 CITY - ST - ZIP	WPB FL 33417	Addition
TITLE	TD	DELETE	3,1 TITLE	Change	
NAME	HOLLANDER, RENAE		3.2 NAME		
STREET ADDRESS	NORWICH G 150		3.3 STREET ADDRESS	5	
CITY-ST-ZIP	W PALM BCH, FL 00000	DELETE	3.4. CITY-ST-ZIP	SECRETARY Change	Addition
TITLE	SD	M DELETE	4.1 TITLE	SECKETHAT WEINBERGER	Mudition
NAME	WEINBERGER, SARA		4, 2 NAME		
STREET ADDRESS	NORWICHG 154		4.3 STREET ADDRESS	M& B Er 33413	
CITY-ST-ZIP	W PALM BCH, FL 00000	™ DELETE	4.4 CITY-ST-ZIP 5.1 TITLE		Addition
TITLE	· · · · · · · · · · · · · · · · · · ·	NA DETERE	5.2 NAME	DIRECTOR	
1	MINDEL, MICHAEL		J.Z MAINE	GLORIA GETTING	_
STREET ADDRESS			E 9 OTDEET ADDRESS		ER
	NORWICH G 155		5.3 STREET ADDRESS	NORWICH G 150	RER
CITY-ST-ZIP	W PALM BCH, FL 00000	M nei ete	5.4 CITY-ST-ZIP	NORWICH G ISO	
TITLE NAME		₩ DELETE		NORWICH G 150	∠ER Addition

14. I hereby certify that the information supplied with this filling 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.

CITY - ST - ZIP

1/3/28

FILED

Jan 15 1998 8:00am

Secretary of State