## **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 # 742805

1. Corporation Name

(5)

WINDSOR C CONDOMINIUM ASSOCIATION, INC.

Window									
Principal Place	e of Business	Mailing Address				HI BINA WHEE BINH			
64 WINDSOR C WEST PALM BE US	ACH FL 33417	64 WINDSOR C WEST PALM BEACH FL 33417-2412 US				Ta- B-t(			
						3. Date Incorporated or Qualified 05/08/1978	3a. Date of 02/1	15/199	<b>6</b>
2. Principal Pa	ace of Business	2a. Mailing Address			4. FEI Number 59-1661111	Applied For			
21		Suite, Apt. #. etc.			60.75				
Suite, Apt #, etc.		27	27			5. Certificate of Status Desired Fee Required			
City & State		City & State			6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees				
Zφ	Country	Zip Country			8. This corporation has liability for intangible tax under s. 199.032,				
24	25		30			Florida Statutes Yes Yes No  10. Name and Address of New Registered Agent			
	9. Name and Address of Currer	it Hegistered Agent		<b>81</b> Na	ne	10. Name and Address of New Ae	harated when		
DUDTON	IOACE		L						
BURTON, JOYCE C-64 WINDSOR, CENTURY VILLAGE			[]	<b>62</b> Str	et Addre	ress (P.O. Box Number is Not Acceptable)			
	BEACH, 33417		83				<del></del>		
TI. I ALII	DEACH, COTH						- las	1 7:n C	`ada
				<b>64</b> City	,		FL 85	i Zip C	/OGB
11. Pursuant	to the provisions of Sections 617.050	2 and 617.1508, Florida Statute	es, the ab	ove-nan	ned corp	oration submits this statement for the p	urpose of char	nging its	registered
agent. La	egistered agent, or both, in the State im familiar with, and accept the oblig	ations of, Section 617.0503, Fig	orida Statu	ites.	corporati	on's board of directors. I hereby accep	a mo appointi	10111 05 1	ogistored
SIGNATURE									
12.	Signature, typed or printed name of registered age	ent and title if applicable. (NOTI ID DIRECTORS	E: Hegistered	Agent sign	ature require	ed when reinstaling) ADDITIONS/CHANGES TO OFFIC	DATE CERS AND DIR	ECTOR:	S IN 12
TITLE	P	DELETE	1.1 TIT	LE	<u> </u>	7,000110100111100011001111		Change	Addition
NAME	BURTON, JOYCE		1.2 NA	MĚ				-	
STREET ADDRESS	WINDSOR C64		1.3 ST	REET ADDRI	:ss				
CHY-ST-ZIP	W PALM BCH, FL 00000		1.4 CiT	Y-ST-ZIP					
TITLE	S	☐ DELETE	2 1 TIT	<b>LE</b>				Change	Addition
NAME	FORD, JOAN		2.2 NA	ME					
STREET ADDRESS	564 WINDSOR C		2.3 \$11	reet addri	SS				
CITY - ST - ZIP	W PALM BCH, FL 00000	DELETE		TY-ST-ZIP				Change	Addition
TITLE	   Farrell, Carmella	□ DELETE	3.1 TIT 3.2 NA		İ		ا لیبیا ۱	פוליוצוור	L Addition
NAME STREET ADORESS	WINDSOR C53			me Reet addri	:00				
CITY-ST-ZIP	W PALM BCH, FL 00000		•	TY-ST-ZIP					
TITLE	D	DELETE	4.1 Til		$\dashv$			Change	Addition
NAME	SCHLANSKY, LAURA		4. 2 NA	AME					
STREET ADDRESS	50 WINDSOR C		4.3 STI	reet addr	ESS				
CITY-ST-ZIP	WEST PALM BEACH FL		4.4 CfT	ry-st-z∤P					
TITLE	D	DELETE	5.1 TIT	'LE	ĮΣ.	ETRICK. Adminne	· ·	Change	Addition
NAME	KORNFELD, BEATRICE		5.2 NA		Im	EIRICK, BUIRAN-			
STREET ADDRESS	WINDSOR C60			REET ADDR	ESS  W	INDSOR CH3 ESTPALM.BCH.FL.	33417		
CITY-ST-ZIP	WEST PALM BEACH FL	DELETE	5.4 C() 6.1 T()	TY-ST-ZIP	<u>  W</u>	STATEMACHIL		Change	Addition
TITLE	V	- Druce	6.2 NA				٠ .	₩-7tt11 <b>g</b> 0	
NAME CLOSEST ASSISTED	EDELMAN, RUTH WINDSOR C41		4	imie Reet adda	FSS				
STREET ADDRESS	WEST PALM BEACH FL			NGET ADDR TY+ST-ZIP					
14. I do here	by certify that the information supplie	ed with this filing does not quali	fy for the	exempti	on stated	in Section 119.07(3)(i), Florida Statute	s. I further ceri	tify that t	the
information	on indicated on this annual report of	supplemental annual report is t ir the receiver or trustee empow	true and a vered to e	ccurate	and that	my signature shall have the same lega t as required by Chapter 617, Florida S	al effect as if m	iade und	der oath: that

SIGNATURE: JONGE V. Suntan

OVER AND TYPED OF PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2-26-97 561-683-5

**FILED** 

Mar 05 1997 8:00am

Secretary of State