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**Feb 05 1998 8:00am  
Secretary of State**

NONPROFIT CORPORATION ANNUAL REPORT 1998



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

DOCUMENT # 742817 (0)  
1. Corporation Name  
WINDSOR P CONDOMINIUM ASSOCIATION, INC.



Principal Place of Business: % NORMAN WOLMAN, 360 WINDSOR P, WEST PLAM BEACH FL 33417-2462, US  
Mailing Address: % NORMAN WOLMAN, 360 WINDSOR P, WEST PLAM BEACH FL 33417-2462, US

3. Date Incorporated or Qualified: 05/08/1978

4. FEI Number: 59-1714364  
Applied For: Not Applicable

2. Principal Place of Business (21-24) and Mailing Address (25-30) details including Suite, City & State, Zip, and Country.

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

6. Election Campaign Financing Trust Fund Contribution:  \$5.00 May Be Added to Fees

7. Is this nonprofit corporation a homeowners association?  Yes  No

8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30.  Yes  No

9. Name and Address of Current Registered Agent: WOLMAN, NORMAN, 360 WINDSOR P, WPB FL 33417

10. Name and Address of New Registered Agent (81-85)

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, 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 617.0503, Florida Statutes.

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

12. OFFICERS AND DIRECTORS

TITLE	PD	<input type="checkbox"/> DELETE
NAME	WOLMAN, NORMAN	
STREET ADDRESS	360 WINDSOR P	
CITY-ST-ZIP	W.P.B. FL 33417	
TITLE	VPD	<input checked="" type="checkbox"/> DELETE
NAME	NOLTINE, PETER	
STREET ADDRESS	368 WINDSOR P	
CITY-ST-ZIP	W.P.B. FL 33417	
TITLE	SD	<input type="checkbox"/> DELETE
NAME	SPERLING, DAVID	
STREET ADDRESS	353 WINDSOR P	
CITY-ST-ZIP	WEST PALM BEACH FL 33417	
TITLE	4B	<input type="checkbox"/> DELETE
NAME	SMALL, IDA	
STREET ADDRESS	355 WINDSOR P	
CITY-ST-ZIP	W.P.B. FL 33417	
TITLE	D	<input checked="" type="checkbox"/> DELETE
NAME	ARLEN, ROBERT	
STREET ADDRESS	359 WINDSOR P	
CITY-ST-ZIP	WEST PALM BEACH FL 33417	
TITLE	D	<input checked="" type="checkbox"/> DELETE
NAME	TEICHSIR, SYLVIA	
STREET ADDRESS	361 WINDSOR P	
CITY-ST-ZIP	W.P.B. FL 33417	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	JOB PLATZNER
1.3 STREET ADDRESS	352 WINDSOR P
1.4 CITY-ST-ZIP	WPB FL 33417
2.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	OLGA WOLKENSTEIN
2.3 STREET ADDRESS	364 WINDSOR P
2.4 CITY-ST-ZIP	WPB FL 33417
3.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	TOBY ARLEN
3.3 STREET ADDRESS	359 WINDSOR P
3.4 CITY-ST-ZIP	WPB FL 33417
4.1 TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
4.2 NAME	WILLIAM FULTON
4.3 STREET ADDRESS	369 WINDSOR P
4.4 CITY-ST-ZIP	WPB FL 33417
5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY-ST-ZIP	
6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 CITY-ST-ZIP	

14. I 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 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: WINDSOR P CONDO ASSOC INC BY Norman Wolman 1/22/98 561 848325

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