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FILED
Apr 22 1998 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # 749484 (2)

1. Corporation Name
PIEDMONT "G" ASSOCIATION, INC.



Principal Place of Business		Mailing Address	
C/O PRIME MANAGEMENT GROUP, INC. 6300 PRK OF COMMERCE BLVD BOCA RATON FL 33487 US		C/O PRIME MANAGEMENT GROUP, INC. 6300 PRK OF COMMERCE BLVD BOCA RATON FL 33487 US	
2. Principal Place of Business	2a. Mailing Address	3. Date Incorporated or Qualified	4. FEI Number
21 Suite, Apt #, etc.	26 Suite, Apt #, etc.	10/23/1979	59-2029123
22 City & State	27 City & State	5. Certificate of Status Desired	Applied For / Not Applicable
23 Zip	28 Zip	<input type="checkbox"/> \$8.75 Additional Fee Required	
24 Country	30 Country	6. Election Campaign Financing Trust Fund Contribution	<input type="checkbox"/> \$5.00 May Be Added to Fees
		7. Is this nonprofit corporation a homeowners association?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
		8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30.	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

9. Name and Address of Current Registered Agent

SWATT, MYRON
6300 PK OF COMMERCE BLVD
1051 S ROGERS CIR
BOCA RATON FL 33487

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City
85 Zip Code

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]* DATE: _____

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	NAME	1.1 TITLE	1.2 NAME
<input type="checkbox"/> DELETE	SHAW, MATTHEW 201 PIEDMONT G DELRAY BEACH FL	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
<input checked="" type="checkbox"/> DELETE	BENNIN, SOL 308 PIEDMONT G DELRAY BEACH FL	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition	PETERS, MILTON 303 PIEDMONT G DELRAY BEACH FL
<input type="checkbox"/> DELETE	BROWN, MOLLY KINGS PT. PIEDMONT G 308 DELRAY BEACH FL	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
<input checked="" type="checkbox"/> DELETE	WOFCHUCK, JACK KINGS PT. PIEDMONT G 329 DELRAY BEACH FL	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition	WESSLER, MARK 301 PIEDMONT G DELRAY BEACH, FL
<input checked="" type="checkbox"/> DELETE	KESSEL, ALVAN 313 PIEDMONT G DELRAY BCH FL	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition	BERNSTEIN, JACK 389 PIEDMONT G DELRAY BEACH FL
<input type="checkbox"/> DELETE	POLLACK, LOU 330 PIEDMONT G DELRAY BCH FL	<input type="checkbox"/> Change <input type="checkbox"/> Addition	

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: *[Signature]*

3/11/98

CR2E037 (10/97)