

FILE NOW: FILING FEE IS \$61.25

FILED  
Mar 26 1998 8:00am  
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1998



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

DOCUMENT # 751658  
1. Corporation Name  
Vista Del Lago Condominium Association, Inc.

Principal Place of Business Mailing Address

3. Date Incorporated or Qualified  
03/21/1980

4. FEI Number  
59-2047713

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

2. Principal Place of Business  
21 Assoc. Prop. Mgmt  
Suite, Apt. #, etc. #10  
22 400 S. Dixie Hwy  
City & State  
23 Lake Worth, FL  
Zip  
24 33460  
Country  
25 USA

2a. Mailing Address  
26 Assoc. Prop. Mgmt.  
Suite, Apt. #, etc. #10  
27 400 S. Dixie Hwy  
City & State  
28 Lake Worth, FL  
Zip  
29 33460  
Country  
30 USA

9. Name and Address of Current Registered Agent

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: *Michael Wood* DATE: 3/19/98

12. OFFICERS AND DIRECTORS

TITLE  DELETE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

1. D  
Wood, Michael  
1800 Embassy Drive, #126  
WPPB, FL

TITLE  DELETE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

2. PD  
Coyner, Laura  
1800 Embassy Drive, #108  
WPPB, FL

TITLE  DELETE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

3. TD  
Czajkowski, Peter  
1800 Embassy Drive, #107  
WPPB, FL

TITLE  DELETE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

4. ~~PD~~  
~~WPPB, FL~~

TITLE  DELETE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

5. DS  
Winer, Marc  
1800 Embassy Drive, #116  
WPPB, FL

TITLE  DELETE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

6. DV  
Hoffrichter, Merle  
1800 Embassy Drive, #131  
WPPB, FL

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1-TITLE  Change  Addition  
1.2 NAME  
1.3 STREET ADDRESS  
1.4 CITY-ST-ZIP

2.1 TITLE  Change  Addition  
2.2 NAME  
2.3 STREET ADDRESS  
2.4 CITY-ST-ZIP

3.1 TITLE  Change  Addition  
3.2 NAME  
3.3 STREET ADDRESS  
3.4 CITY-ST-ZIP

4.1 TITLE  Change  Addition  
4.2 NAME  
4.3 STREET ADDRESS  
4.4 CITY-ST-ZIP

5.1 TITLE  Change  Addition  
5.2 NAME  
5.3 STREET ADDRESS  
5.4 CITY-ST-ZIP

6.1 TITLE  Change  Addition  
6.2 NAME  
6.3 STREET ADDRESS  
6.4 CITY-ST-ZIP

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D  
Rutter, Royce  
1800 Embassy Drive, #130  
WPPB, FL

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. I changed or am attaching with an address.

SIGNATURE: *Michael Wood*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date: \_\_\_\_\_ Daytime Phone #: \_\_\_\_\_

CR2E037 (10/97)