

FILE NOW: FILING FEE IS \$61.25

FILED

Apr 23 1997 8:00am  
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1997



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

DOCUMENT # 758032 (7)  
1. Corporation Name  
THE WATERVIEW TOWERS CONDOMINIUM ASSOCIATION, IN C.



Principal Place of Business Mailing Address  
% B. J. BRODIE, MGR.  
400 N. FLAGLER DR.  
W. PALM BEACH FL 33401

3. Date Incorporated or Qualified 08/03/1981  
3a. Date of Last Report 05/01/1996

2. Principal Place of Business 2a. Mailing Address  
21 c/o Donna A. Bashar, Mgr. 26 c/o Donna A. Bashar, Mgr.  
Suite, Apt #, etc. Suite, Apt #, etc.  
22 City & State 27 City & State  
23 Zip Country 28 Zip Country  
24 25 29 30

4. FEI Number 59-2113086 Applied For Not Applicable  
5. Certificate of Status Desired \$8.75 Additional Fee Required  
6. Election Campaign Financing Trust Fund Contribution \$5.00 May Be Added to Fees  
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes Yes No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

BASHAR, DONNA A.  
400 N. FLAGLER DR.  
# 803  
W. PALM BEACH FL 33401

81 Name  
82 Street Address (P.O. Box Number is Not Acceptable)  
83 Manager's Office  
84 City FL 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 Donna A. Bashar, Manager April 11, 1997  
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

Table with 2 columns: Title, Name, Street Address, City-ST-ZIP. Rows include Christopher Thomas, Dorsten Rita, Bergmann Arthur, Daniels Harvey, Lazarus Arlene, Isenberg Marjorie.

Table with 2 columns: Title, Name, Street Address, City-ST-ZIP. Rows include Anthony Leggett, Jane McGregor.

14. I do 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: Rita Dorsten April 11, 1997 561-833-5201  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone # 0038081

CR2E037 (9/96)