FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT

1997

DINGEE, ARTHUR

I am an officer or director of the appears in Block 12 or Block 13

3826 WHITEHALL DR #206

WEST PALM BEACH FL

NAME

STREET ADDRESS

SIGNATURE:

CITY-ST-ZIP



FLORIDA DEPARTMENT OF STATE

FILED

May 01 1997 8:00am

Secretary of State

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #

1. Corporation Name

Principal Place of Business

768717

(1)

Malling Address

WHITEHALL CONDOMINIUMS OF THE LANDS OF THE PRESI DENT ASSOCIATION, INC.

3700 WHITEHAL WEST PALM BO	.L DR. CH FL 33401-1051	3700 WHITEHALL DR. WEST PALM BCH FL 33401-1095				
						3. Date Incorporated or Qualified 3a. Date of Last Report 06/01/1983 04/11/1996
2. Principal Place of Business 2a. Mailing Address						4. FEI Number Applied For
21		26				59-2344369 Not Applicable
Suite, Apt	#, etc	Suite, Apt. #, etc.				5. Certificate of Status Desired
City & State	9	City & State				6. Election Campaign Financing \$5.00 May Be
23		28				Trust Fund Contribution
Zip	Country	Zıp	Cou	Country		8. This corporation has liability for Intangible tax under s. 199.032,
24	25	29	30	<u>) </u>		Florida Statutes
	9. Name and Address of Current	Registered Agent				10. Name and Address of New Registered Agent
				81	Name	
BECKER & POLIAKOFF , P.A. C/O RANDY DEHAYES				82	Street A	Address (P.O. Box Number is Not Acceptable)
450 AUSTRIALIAN AVENUE SOUTH, SUITE 720				83		
	ALM BEACH FL 33401	L / LV				
	:			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 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 reagent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.						
SIGNATURE Signature typed or printed name of registered agent and little if applicable (NOTE: Registered Agent signature regulard when reinstating) DATE						
12.	OFFICERS AND		13.	u nyo	aut signature i	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	DP	DELETE	1.1 T	TLE		DS Change X Addition
NAME	KOWLSKI, THEODORE		1.2 N	AME	ł	GOLEMBIEWSKI, RONALD
STREET ADDRESS	3716 WHITEHALL DR #204		1.3 S	TREET	ADDRESS	3520 WHITEHALL DR. #202
CITY-ST-ZIP	W PALM BCH FL		1.4 C	ITY-S	T-ZIP	W.PALM BCH, FL
TOTLE	DV	DELETE	2.1 T			DT Change Addition
NAME	MCKENNA, JOHN		2.2 N	AME	1	PANNIELLO, VINCENT
STREET ADORESS	3526 WHITEHALL DR #201		2.3 STREE		ADDRESS	3710 WHITEHALL DR #403
CITY-ST-ZIP	WEST PALM BEACH FL		2.40	HY-S	ST-ZIP	WEST PALM BCH FL
TITLE	D	☐ DELETE	3.1 T	TLE		☐ Change ☐ Addition
NAME	LEVIN, NATHAN D	D 3.		AME	ŀ	
STREET ADDRESS	3540 WHITEHALL DR #103		3.3 S	TREET	ADDRESS	
CITY - ST - ZIP	WEST PALM BEACH FL		3.4. 0	ITY-S	SY-ZIP	
TIRE	DS	ELETE	4.1 Ti	TLE		Change Addition
NAME	LUTIN, JACK		4,21	IAME	Ì	
STREET ADDRESS	3826 WHITEHALL DR #104		4.3 S	TREET	ADDRESS	
CITY-SI-ZIP	WEST PALM BEACH FL		4.4 C	rty-s	T-ZIP	
TITLE	D	DELETE	5.1 T	TLE	-,	Change Addition
NAME.	LEVIN, NATHAN D	• •	5.2 N	AME	- 1	
STREET ADDRESS	3540 WHITEHALL DR #103		5.3 S	TREET	ADDRESS	
CITY-ST-ZIP	West Palm Beach Fl		5.4 C	ITY-S	T-ZIP	,
Titi F	DT	DELETE	61 T	T) F		Change Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP 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 Systutes; and that my name