



2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 11, 2008 8:00 am
Secretary of State

02-11-2008 90065 014 ****61.25

DOCUMENT # 768717					
1. Entity Name WHITEHALL CONDOMINIUMS OF THE LANDS OF THE PRESIDENT ASSOCIATION, INC.					
Principal Place of Business 3700 WHITEHALL DR. WEST PALM BCH, FL 33401-1051			Mailing Address 3700 WHITEHALL DR. WEST PALM BCH, FL 33401-1051		
2. Principal Place of Business - No P.O. Box #		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State		01142008 Chg-NP CR2E037 (12/06)	
4. FEI Number 59-2344369		Applied For Not Applicable			
5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required			
6. Name and Address of Current Registered Agent			7. Name and Address of New Registered Agent		
BECKER & POLIAKOFF, P.A. C/O KENNETH DIREKTOR 625 N. FLAGLER DR. IVE, 7TH FLOOR WEST PALM BEACH, FL 33401			Name		
			Street Address (P.O. Box Number is Not Acceptable)		
			City		FL
8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.					
SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____					
Filing Fee is \$61.25 Due by May 1, 2008		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>		\$5.00 May Be Added to Fees	
Make check payable to Florida Department of State					
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE	DS <input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
NAME	BRIGHAM, LILLA	NAME			
STREET ADDRESS	3710 WHITEHALL DRIVE, #401	STREET ADDRESS			
CITY-ST-ZIP	WEST PALM BEACH, FL 33401	CITY-ST-ZIP			
TITLE	DV <input type="checkbox"/> Delete	TITLE	Jordan Zarren (DV) <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition		
NAME	MCRAE, KATHERINE	NAME	3710 Whitehall Dr. #404		
STREET ADDRESS	3700 WHITEHALL DR, #405	STREET ADDRESS	Nest Palm Beach, FL 33401.		
CITY-ST-ZIP	WEST PALM BEACH, FL 33401	CITY-ST-ZIP			
TITLE	DT <input checked="" type="checkbox"/> Delete	TITLE	Phyllis Addorley (DT) <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition		
NAME	BLAIR, ALLAN	NAME	3500 Whitehall Drive, #102		
STREET ADDRESS	3540 WHITEHALL DR, #402	STREET ADDRESS	Nest Palm Beach, FL 33401		
CITY-ST-ZIP	WEST PALM BEACH, FL 33401	CITY-ST-ZIP			
TITLE	DP <input checked="" type="checkbox"/> Delete	TITLE	Katherine Mcrae (DP) <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition		
NAME	LAMENDOLA, PETER	NAME	3500 Whitehall Drive, # 405		
STREET ADDRESS	3526 WHITHALL DR #303	STREET ADDRESS	Nest Palm Beach, FL 33401		
CITY-ST-ZIP	WEST PALM BEACH, FL 33401	CITY-ST-ZIP			
TITLE	D <input type="checkbox"/> Delete	TITLE			
NAME	FEE, EDWARD	NAME			
STREET ADDRESS	3516 WHITEHALL DRIVE, #203	STREET ADDRESS			
CITY-ST-ZIP	WEST PALM BEACH, FL 33401	CITY-ST-ZIP			
TITLE	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
NAME		NAME			
STREET ADDRESS		STREET ADDRESS			
CITY-ST-ZIP		CITY-ST-ZIP			
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.					
SIGNATURE: 		Date: 5/21-478-1351		Daytime Phone #	
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR					