FILE NOW: FILING FEE IS $61.25

NONPROFIT CORPORATION ANNUAL REPORT

1999

FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

FILED
Apr 27, 1999 8:00 am
Secretary of State
04-27-1999 90004 041 ****61.25

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DOCUMENT # N06976

1. Corporation Name

THE ENCLAVE OF PALM BEACH CONDOMINIUM ASSOCIATIO N, INC.

Principal Place of Business	Mailing Address
3170 SOUTH OCEAN BLVD. PALM BEACH FL 33480	3170 SOUTH OCEAN BLVD. PALM BEACH FL 33480

2. Principal Place of Business (21)

Suite, Apt. #, etc. (22)

City & State (23)

Zip (24) Country (25)

2a. Mailing Address (26)

Suite, Apt. #, etc. (27)

City & State (28)

Zip (29) Country (30)

3. Date Incorporated or Qualifed: 01/07/1985

4. FEI Number: 59-2495222 ☐ Applied For ☐ Not Applicable

5. Certifcate of Status Desired ☐ **$8.75** Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution ☐ **$5.00** May Be Added to Fees

9. Name and Address of Current Registered Agent

CHERYL L. DDUNIVANT
3170 S.OCEAN BLVD.
PALM BEACH FL 33480

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

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 Cheryl L. Dunivant Cheryl L. Dunivant/Manager 04/23/99
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	P	☐ DELETE	1.1 TITLE	VP	☐ Change ☒ Addition
NAME	BOTVIN, BURTON		1.2 NAME	Sherman Seeche	
STREET ADDRESS	3170 S OCEAN BLVD		1.3 STREET ADDRESS	3170 S Ocean Blvd	
CITY-ST-ZIP	PALM BEACH FL		1.4 CITY-ST-ZIP	Palm Beach, FL 33480	
TITLE	VP	☐ DELETE	2.1 TITLE	S	☐ Change ☒ Addition
NAME	KAPLAN, HAROLD		2.2 NAME	Leonard Kahn	
STREET ADDRESS	3170 S OCEAN BLVD		2.3 STREET ADDRESS	3170 S Ocean Blvd	
CITY-ST-ZIP	PALM BCH. FL 33480		2.4 CITY-ST-ZIP	Palm Beach, FL 33480	
TITLE	D	☐ DELETE	3.1 TITLE	D	☐ Change ☒ Addition
NAME	BERLINER, JUDY		3.2 NAME	Leslie Groffman	
STREET ADDRESS	3170 S OCEAN BLVD		3.3 STREET ADDRESS	3170 S Ocean Blvd	
CITY-ST-ZIP	PALM BEACH FL 33480		3.4 CITY-ST-ZIP	Palm Beach, FL 33480	
TITLE	D	☐ DELETE	4.1 TITLE	D	☒ Change ☐ Addition
NAME	SHAPIRO, NORMA		4.2 NAME	Burton Botvin	
STREET ADDRESS	3170 S OCEAN BLVD		4.3 STREET ADDRESS		
CITY-ST-ZIP	PALM BEACH FL 33480		4.4 CITY-ST-ZIP		
TITLE	S	☐ DELETE	5.1 TITLE	P	☒ Change ☐ Addition
NAME	BRODIE, SIDNEY		5.2 NAME	Harold Kaplan	
STREET ADDRESS	3170 S OCEAN BLVD		5.3 STREET ADDRESS		
CITY-ST-ZIP	PALM BEACH FL		5.4 CITY-ST-ZIP		
TITLE	TD	☐ DELETE	6.1 TITLE	D	☒ Change ☐ Addition
NAME	WECHSLER, IRVING		6.2 NAME	Sidney Brodie	
STREET ADDRESS	3170 S. OCEAN BLVD.		6.3 STREET ADDRESS		
CITY-ST-ZIP	PALM BEACH FL		6.4 CITY-ST-ZIP		

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, with all other like empowered.

SIGNATURE: SIGNATURE REQUIRED Harold L. Kaplan 4-23-99
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

CR2E037 (11/98)