

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
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DOCUMENT # N27657 (8)
 1. Corporation Name
WEST BAY AT JONATHAN'S LANDING CONDOMINIUM ASSOCIATION, INC.



Principal Place of Business 103 SOUTH US 1, F5-135 JUPITER FL 33458 US	Mailing Address 103 S US 1, F5-135 JUPITER FL 33458 US
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3. Date Incorporated or Qualified 07/28/1988		
4. FEI Number 65-0108127	Applied For <input type="checkbox"/>	Not Applicable <input type="checkbox"/>
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required	
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees	
7. Is this nonprofit corporation a homeowners association? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		
8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		

2. Principal Place of Business 21 Sulte, Apt. #, etc. 22 City & State 23 Zip Country	2a. Mailing Address 26 Sulte, Apt. #, etc. 27 City & State 28 Zip Country
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9. Name and Address of Current Registered Agent INGLIS, STEVE C/O BRISTOL MANAGEMENT SERVICES 103 S US 1, F5-135 JUPITER FL 33458	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
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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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

12. OFFICERS AND DIRECTORS	
TITLE	PD <input type="checkbox"/> DELETE
NAME	SCHOTLAND, MILTON
STREET ADDRESS	3911 SCHOONER PTE #208
CITY-ST-ZIP	JUPITER FL
TITLE	TD <input type="checkbox"/> DELETE
NAME	BERNHEIM, ELI
STREET ADDRESS	3941 SCHOONER PTE #113
CITY-ST-ZIP	JUPITER FL
TITLE	S <input type="checkbox"/> DELETE
NAME	MASCIA, EMIL
STREET ADDRESS	16151 WEST BAY DRIVE, #280
CITY-ST-ZIP	JUPITER FL
TITLE	D <input type="checkbox"/> DELETE
NAME	TRAVERS, HILLARD
STREET ADDRESS	16000 WEST BAY DR #259
CITY-ST-ZIP	JUPITER FL
TITLE	D <input checked="" type="checkbox"/> DELETE
NAME	RUBINSTEIN, DANIEL
STREET ADDRESS	16151 WEST BAY DRIVE, #180
CITY-ST-ZIP	JUPITER FL
TITLE	<input type="checkbox"/> DELETE
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY-ST-ZIP	
2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY-ST-ZIP	
3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY-ST-ZIP	
4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY-ST-ZIP	
5.1 TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
5.2 NAME	D MELBOURN CHARLES
5.3 STREET ADDRESS	3881 BACK BAY DR # 119
5.4 CITY-ST-ZIP	JUPITER, FL
6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME	
6.3 STREET ADDRESS	
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)(l), 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.

MELBOURN CHARLES
 3/18/98 561-575-3551

CR2E037 (10/97)