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Mar 05 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 # N29065 (2)

1. Corporation Name

WATERFORD AT ABERDEEN ASSOCIATION, INC.



Principal Place of Business

Mailing Address

% CMD MGMT INC
3082 JOG RD
LAKE WORTH FL 33467
US

% CMD MGMT INC
3082 JOG RD
LAKE WORTH FL 33467-2053
US

3. Date Incorporated or Qualified
11/01/1988

3a. Date of Last Report
03/25/1996

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip

25 Country

28 Zip

30 Country

4. FEI Number
65-0087650

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

ROSENTHAL, DAVID C.
3082 JOG RD
LAKE WORTH FL 33467

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 *David C. Rosenthal*

1/30/97

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
NAME DARIEN, AL
STREET ADDRESS 8498 HEATHER PLACE
CITY-ST-ZIP BOYNTON BEACH FL

1.1 TITLE Change Addition
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP

TITLE TD DELETE
NAME BERGRIN, DAVID
STREET ADDRESS 7270 HEARTSTONE
CITY-ST-ZIP BOYNTON BEACH FL

2.1 TITLE Change Addition
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

TITLE VPD DELETE
NAME SCHOOMER, WIL
STREET ADDRESS 4965 LE CHALET BOULEVARD
CITY-ST-ZIP BOYNTON BEACH FL

3.1 TITLE VP Change Addition
3.2 NAME Richard Weiss
3.3 STREET ADDRESS 8438 Heather Place
3.4 CITY-ST-ZIP Boynton Beach, FL 33437

TITLE D DELETE
NAME MITTLEMAN, LES
STREET ADDRESS 7301 HEARTHSTONE AVE
CITY-ST-ZIP BOYNTON BEACH FL

4.1 TITLE D Change Addition
4.2 NAME Charlie Goldstein
4.3 STREET ADDRESS 8370 Lords Place
4.4 CITY-ST-ZIP Boynton Beach, FL 33437

TITLE D DELETE
NAME FREEHLING, BOB
STREET ADDRESS 8467 HEATHER PLACE
CITY-ST-ZIP BOYNTON BEACH FL

5.1 TITLE D Change Addition
5.2 NAME Daniel Issenberg
5.3 STREET ADDRESS 8470 Juddith Avenue
5.4 CITY-ST-ZIP Boynton Beach, FL 33437

TITLE DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

6.1 TITLE D Change Addition
6.2 NAME Larry Cohen
6.3 STREET ADDRESS 8449 Heather Place
6.4 CITY-ST-ZIP Boynton Beach, FL 33437

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 199.03(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: *Albert T. Orien* PRES. 2/23/97 561 364 4029

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone # 0044076

CF2E037 (9/96)