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Mar 24 1997 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **N36459** (8)

1. Corporation Name

**ANDOVER C CONDOMINIUM ASSOCIATION INC. OF WEST P
ALM BEACH**



Principal Place of Business

Mailing Address

**78 ANDOVER C
C/O BENJAMIN FRIEDMAN
WEST PALM BEACH FL 33417-2652
US**

**78 ANDOVER C
C/O FRIEDMAN, BENJAMIN
WEST PALM BEACH FL 33417-2652
US**

3. Date Incorporated or Qualified
02/05/1990

3a. Date of Last Report
03/22/1996

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
59-1637925

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

**FRIEDMAN, BENJAMIN
78 ANDOVER C
WEST PALM BEACH FL 33417**

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

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS		
TITLE	VP	☐ DELETE
NAME	RADONSKY, AL	
STREET ADDRESS	53 ANDOVER C	
CITY - ST - ZIP	W. PALM BEACH FL	
TITLE	D	☐ DELETE
NAME	SCHERMER, GLADYS	
STREET ADDRESS	65 ANDOVER C	
CITY - ST - ZIP	W. PALM BEACH FL	
TITLE	D	☐ DELETE
NAME	BLECHER, SUE	
STREET ADDRESS	62 ANDOVER C	
CITY - ST - ZIP	W. PALM BEACH FL	
TITLE	D	☐ DELETE
NAME	GOLDSTEIN, MAX	
STREET ADDRESS	69 ANDOVER C	
CITY - ST - ZIP	W. PALM BEACH FL	
TITLE	T	☐ DELETE
NAME	RADONSKY, MONA	
STREET ADDRESS	53 ANDOVER C	
CITY - ST - ZIP	W. PALM BEACH FL	
TITLE	P	☐ DELETE
NAME	FRIEDMAN, BENJAMIN	
STREET ADDRESS	78 ANDOVER C	
CITY - ST - ZIP	W. PALM BEACH FL	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
1.1 TITLE	D	☐ Change ☒ Addition
1.2 NAME	Palmsano, Robert	
1.3 STREET ADDRESS	71 ANDOVER C	
1.4 CITY - ST - ZIP	W. Palm Beach, FL	
2.1 TITLE	D	☐ Change ☒ Addition
2.2 NAME	Adkinson, Selma	
2.3 STREET ADDRESS	61 ANDOVER C	
2.4 CITY - ST - ZIP	W. Palm Beach, FL	
3.1 TITLE	D	☐ Change ☒ Addition
3.2 NAME	Schechtel, Frances	
3.3 STREET ADDRESS	55 ANDOVER C	
3.4 CITY - ST - ZIP	W. Palm Beach, FL	
4.1 TITLE	D	☐ Change ☒ Addition
4.2 NAME	Kramer, Amy	
4.3 STREET ADDRESS	63 ANDOVER C	
4.4 CITY - ST - ZIP	W. Palm Beach, FL	
5.1 TITLE	S.	☐ Change ☒ Addition
5.2 NAME	Eleanor Podberesky	
5.3 STREET ADDRESS	71 ANDOVER C	
5.4 CITY - ST - ZIP	W. Palm Beach, FL	
6.1 TITLE		☐ 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 Statutes, and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone # 0038324

CR2E037 (9/96)