

FILE NOW: FILING FEE IS \$61.25

FILED
Apr 16 1998 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
---	---	---

DOCUMENT # N94000003146 (7)
 1. Corporation Name
WELDON CONDOMINIUM G ASSOCIATION, INC.

Principal Place of Business 3475 HIATUS RD SUNRISE FL 33351	Mailing Address 3475 HIATUS RD SUNRISE FL 33351
--	--

3. Date Incorporated or Qualified
06/24/1994

4. FEI Number 65-0563825	Applied For <input type="checkbox"/> Not Applicable
------------------------------------	--

2. Principal Place of Business 21 Suite, Apt. #, etc. 22 City & State 23 Zip 24 Country	2a. Mailing Address 26 Suite, Apt. #, etc. 27 City & State 28 Zip 29 Country
---	--

5. Certificate of Status Desired **\$8.75 Additional Fee Required**

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

7. Is this nonprofit corporation a homeowners association?
 Yes No

8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30.
 Yes No

9. Name and Address of Current Registered Agent

**WALDRON, MALCOLM H III
 3475 HIATUS ROAD
 SUNRISE FL 33351**

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City
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]* DATE **4/6/98**

12. OFFICERS AND DIRECTORS

TITLE	PD	<input type="checkbox"/> DELETE
NAME	ENOCH, GERALD	
STREET ADDRESS	9511 WELDON CIRCLE #211	
CITY-ST-ZIP	TAMARAC FL 33321	
TITLE	VPO	<input type="checkbox"/> DELETE
NAME	FIRESTONE, RAY	
STREET ADDRESS	9511 WELDON CIRCLE #112	
CITY-ST-ZIP	TAMARAC FL 33321	
TITLE	SD	<input checked="" type="checkbox"/> DELETE
NAME	WOLPIN, MICHAEL	
STREET ADDRESS	9511 WELDON CIRCLE #316	
CITY-ST-ZIP	TAMARAC FL 33321	
TITLE	TD	<input type="checkbox"/> DELETE
NAME	GROSS, HERMAN	
STREET ADDRESS	9511 WELDON CIRCLE #111	
CITY-ST-ZIP	TAMARAC FL 33321	
TITLE	BP2D	<input type="checkbox"/> DELETE
NAME	ZELLANDER, SAM	
STREET ADDRESS	9511 WELDON CIRCLE #416	
CITY-ST-ZIP	TAMARAC FL 33321	
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	SD <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
3.2 NAME	Norma Goldstein
3.3 STREET ADDRESS	9511 Weldon Circle
3.4 CITY-ST-ZIP	Tamarac, FL 33321
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 type="checkbox"/> Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY-ST-ZIP	
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)(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 417, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: *[Signature]* SIGNATURE REQUIRED: *[Signature]* - 4/6/98 954 749 4666

CF2E037 (10/97)