FILED FILE NOW: FILING FEE IS \$61.25 NONPROFIT Mar 13 1998 8:00am FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham ANNUAL REPORT Secretary of State Secretary of State DIVISION OF CORPORATIONS 1998 DOCUMENT # (1)721249 RAPALLO CONDOMINIUM APARTMENTS ASSOCIATION, INC. Principal Place of Business Mailing Address 1701 SOUTH FLAGLER DR. 1701 SOUTH FLAGLER DR. 3. Date Incorporated or Qualified W PALM BCH FL 33401 W PALM BCH FL 33401 <u>06/28/1971</u> 4. FEI Number 59-1440219 2. Principal Place of Business 2a. Mailing Address \$8.75 Additional 5. Certificate of Status Desired 21 26 Fee Required Sulte, Apt. #, etc. Suite, Apt. #, etc. \$5.00 May Be 6. Election Campaign Financing 22 27 Trust Fund Contribution Added to Fees City & State City & State 7. Is this nonprofit corporation a homeowners association? 23 Yes 28 □ No Zip Zip Country 8. This corporation owes or has paid the current year Intangible 24 25 Yes 29 30 Personal Property Tax due June 30. 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name **BECKER & POLIAKOFF**, P.A. 82 Street Address (P.O. Box Number is Not Acceptable) **500 AUSTRALIAN AVE B3 WEST PALM BEACH FL 33401** 84 City 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, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) 12. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. TITLE DELETE 1.1 TITLE President Addition MATIS, J.D. Kalnitsky AENGENE NAME 1.2 NAME 1701 S. FLAGLER DR. STREET ADDRESS 1701 S. Flagler D WEST Palm Bch, 1.3 STREET ADDRESS WEST PALM BEACH FL CITY-ST-ZIP 1.4 CITY-ST-ZIP TITLE DELETE 2.1 TITLE Change Addition Cooker Theodore NAME HEIDIMAN, GEORGE 2.2 NAME 1701 S. Flagler Dr. STREET ADDRESS 1701 S FLAGLER DR 2.3 STREET ADDRESS CITY-ST-ZIP **WEST PALM BEACH FL** 33401 WPB. FL 2. 4 CITY-ST-ZIP TITLE DELETE 31 TITLE ے Change **X** Addition Howard, Sol NAME WOLOSIN, JOHN D. 3.2 NAME 1701 S. Flacler 1701 S FLAGLER DR STREET ADDRESS 3.3 STREET ADDRESS WPB, WEST PALM BEACH FL CITY-ST-ZIP 3.4. CITY-ST-ZIP FL TITLE D DELETE 4.1 TITLE Change ☐ Addition KNOX, Ruth NAME KNOX, RUTH 4 2 NAME 1701 S FLAGLER DR STREET ADORESS 4.3 STREET ADDRESS WEST PALM BEACH FL CITY-ST-ZIP 4.4 CITY-ST-ZIP DELETE TITLE 5.1 TITLE Change X Addition COX, LOUISE Kaplan, Leonard 1701 S. Flagler NAME 5.2 NAME 1701 S FLAGLER DR STREET ADDRESS 5.3 STREET ADDRESS WEST PALM BEACH FL Palm Bch, FL 3340ı CITY-ST-ZIP 5.4 CITY-ST-ZIP TITLE DELETE Change 6.1 TITLE ☐ Addition NAME LEONARD, THELMA 6.2 NAME 1701 S FLAGLER DR STREET ADDRESS 6.3 STREET ADDRESS **WEST PALM BEACH FL** CITY-ST-ZIP 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. (561)

J. C. H. Thelma. SIGNATURE.

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Applied For

Not Applicable