FILE NOW: FILING FEE IS \$61.25

29

9. Name and Address of Current Registered Agent

25

ESPO. ADELE G.

UNIT 401

2400 PRESIDENTIAL WAY

24

NONPROFIT FLORIDA DEPARTMENT OF STATE **CORPORATION** Sandra B. Mortham ANNUAL REPORT Secretary of State 1998 DIVISION OF CORPORATIONS DOCUMENT # LANDS OF THE PRESIDENT CONDOMINIUM THREE, INC. T Principal Place of Business Mailing Address D/B/A LINCOLN TOWER D/B/A LINCOLN TOWER 3. Da 2400 PRESIDENTIAL WAY 2400 PRESIDENTIAL WAY 09/18/1972 4. FEI Number WEST PALM BEACH FL 33401 WEST PALM BEACH FL 33401 <u>59-1444740</u> 2. Principal Place of Business 2a. Mailing Address 5. Certificate of Status Desired 26 Suite, Apt. #, etc. Suite, Apt. #, etc. 6. Election Campaign Financing 27 Trust Fund Contribution 22 City & State City & State 7. Is this nonprofit corporation a homeowners association? Zip Country Country 8. This corporation owes or has paid the current year Intangible

FILED Mar 24 1998 8:00am Secretary of State

te Incorporated or Qualified		
	te Incorporated or Qualified	

Yes

Personal Property Tax due June 30.

Street Address (P.O. Box Number is Not Acceptable)

10. Name and Address of New Registered Agent

□ No

Yes

March 13 9998 561-686-2972

Applied For Not Applicable

\$8.75 Additional

Fee Required

\$5.00 May Be

Added to Fees

WEST PALM BEACH FL 33401		84 City			85 Zip Code				
					FL				
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 ON Signature, typod or priviled namegor regularity spirit and till, if applicable. (NOTE: Repistered Applit signatury-required when reinstalling) ONTE									
12.	OFFICERS AND DIRECTORS	13,	3 707 11	ang nation of neconity		CHANGES TO OF	FICERS AND	DIRECTO	RS IN 12
TITLE	PD DE	LETE 1.1 TI	TLE					Change	☐ Addition
NAME	ESPO, ADELE G	1.2 N	AME					•	ľ
STREET ADDRESS	2400 PRESIDENTIAL WAY #401	1.3 ST	TREET AL	DRESS					
CITY-ST-ZIP	W PALM BCH FL	140	ITY-ST-	7IP					ľ
TITLE	VD DE							☐ Change	Addition
NAME	SCHAEFFER, GERALD	2.2 NA	AME						
STREET ADDRESS	2400 PRESIDENTIAL WAY, #2003	2.3 ST	TREET A	ORESS					i
CITY-ST-ZIP	WEST PALM BEACH FL	2.40	HTY-ST	ZIP]
TITLE	SD DE	LETE 3.1 TO	TLE					Change	Addition
NAME	LEWIN, STANLEY	3.2 NA	AME	1					
STREET ADORESS	2400 PRESIDENTIAL WAY #2006	3.3 ST	TREET AL	DRESS					ŀ
CITY-ST-2IP	W PALM BCH FL	3.4. C	TY-ST-	ZIP					.]
TITLE	TD DE	LETE 4.1 TI	TLE					Change	Addition
NAME	FINESTONE, ARNOLD	4.2 N	IAME	}					
STREET ADDRESS	2400 PRESIDENTIAL WAY #604	4.3 ST	TREET AL	DRESS					
CITY-ST-ZIP	W PLM BCH FL	4.4 CF	ITY-ST-	ZIP					1
TITLE	D DE	LETE 5.1 TO	TLE					Change	Addition
NAME	SCHWARTZ, SEYMOUR	5.2 NA	AME						
STREET ADDRESS	2400 PRESIDENTIAL WAY, #1704	5.3 ST	TREET AL	DRESS					
CITY-ST-ZIP	W PALM BCH FL	5.4 CI	ITY-ST-	ZIP					ì
TITLE	D DE	LETE 6.1 TI	TLE					Change	Addition
NAME	ZARIN, FAY C.	6.2 NA	AME						•
STREET ADDRESS	2400 PRESIDENTIAL WAY #804	6.3 ST	REET AL	DRESS					f
CITY-ST-ZIP	W PALM BCH FL		TY-\$ <u>T-</u>						
14. Thereby 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 suppliemental 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.									

30

Name