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Apr 13 1998 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **715573** (2)

1. Corporation Name

WINDSOR PARK CONDOMINIUM ASSOCIATION, INC.



Principal Place of Business 120 WETTAW LANE NORTH PALM BEACH FL 33408	Mailing Address 120 WETTAW LANE NORTH PALM BEACH FL 33408
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3. Date Incorporated or Qualified 11/15/1968	
4. FEI Number 59-1743270	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
7. Is this nonprofit corporation a homeowners association? <input type="checkbox"/> Yes <input type="checkbox"/> No	
8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input type="checkbox"/> No	

2. Principal Place of Business	2a. Mailing Address
21 Suite, Apt. #, etc.	26 Suite, Apt. #, etc.
22 City & State	27 City & State
23 Zip	28 Zip
24 Country	29 Country
25	30

9. Name and Address of Current Registered Agent SEACREST MANAGEMENT, INC. 3700 GEORGIA AVENUE WEST PALM BEACH FL 33405	
81 Name	
82 Street Address (P.O. Box Number is Not Acceptable)	
83	
84 City	85 Zip Code

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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PD	1.1 TITLE	PD
NAME	WEIGAND, JOYCE	1.2 NAME	SMITH, LEEDITH
STREET ADDRESS	109 WETTAW LANE, #107	1.3 STREET ADDRESS	110 WETTAW LANE, #203
CITY-ST-ZIP	NORTH PALM BEACH FL	1.4 CITY-ST-ZIP	NORTH PALM BEACH, FL
TITLE	VP	2.1 TITLE	VP
NAME	WEIGAND, JOYCE	2.2 NAME	REGAN, JOE
STREET ADDRESS	109 WETTAW LANE, #107	2.3 STREET ADDRESS	120 WETTAW LANE, #207
CITY-ST-ZIP	N. PALM BEACH FL 33408	2.4 CITY-ST-ZIP	NORTH PALM BEACH, FL
TITLE	T	3.1 TITLE	T
NAME	SOUSA, IRENE	3.2 NAME	
STREET ADDRESS	121 WETTAW LANE, #117	3.3 STREET ADDRESS	
CITY-ST-ZIP	NO. PALM BEACH FL	3.4 CITY-ST-ZIP	
TITLE	S	4.1 TITLE	S
NAME	SADLO, ALICE	4.2 NAME	SOLOMON, PAT
STREET ADDRESS	121 WETTAW LANE, #116	4.3 STREET ADDRESS	120 WETTAW LANE, #117
CITY-ST-ZIP	N. PALM BEACH FL	4.4 CITY-ST-ZIP	NORTH PALM BEACH, FL
TITLE	D	5.1 TITLE	D
NAME	CALABRETTA, JERRY	5.2 NAME	KNAPP, STANLEY
STREET ADDRESS	109 WETTAW LANE, #202	5.3 STREET ADDRESS	108 WETTAW LANE, #106
CITY-ST-ZIP	NORTH PALM BEACH FL	5.4 CITY-ST-ZIP	NORTH PALM BEACH, FL
TITLE	D	6.1 TITLE	
NAME	INTINI, JOE	6.2 NAME	
STREET ADDRESS	109 WETTAW LANE, #101	6.3 STREET ADDRESS	
CITY-ST-ZIP	NORTH PALM BEACH FL	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.

SIGNATURE: _____

CR2E037 (10/97)