2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Feb 10, 2006 8:00 am
Secretary of State
02-10-2006 90023 010 ****61.25

DOCUMENT # 718283

1. Entity Name

OXFORD 100 CONDOMINIUM ASSOCIATION INC.

Principal Place of Business	Mailing Address
201 OXFORD 100 WEST PALM BEACH FL 33417	201 OXFORD 100 WEST PALM BEACH FL 33417

1st MOORE CR2E037 (10/05)

2. Principal Place of Business		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country

4. FEI Number 59-1514510 ☐ Applied For ☐ Not Applicable

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

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
ROSS, EDWARD J PRES OXFORD 100 CONDOMINIUM ASSOCIATION, INC. 201 OXFORD 100 WEST PALM BEACH FL 33417	Name Street Address (P.O. Box Number is Not Acceptable) City **FL** Zip Code

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW: FEE IS $61.25
Due By May 1, 2006

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

Make Check Payable to Florida Department of State

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D STANGHERLIN, LISA 209 OXFORD 100 WEST PALM BEACH FL 33417	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP LISE	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	TD MATTHEWS, ESTELLE 105 OXFORD 100 WEST PALM BEACH FL 33417	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP VD KELLNER, HOWARD B. 206 OXFORD 100 WEST PALM BEACH, FL 33417	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	SD CHARNOFF, EDITH 103 OXFORD 100 WEST PALM BEACH FL 33417	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP D GRUNES, DR. JEROME 109 OXFORD 100 WEST PALM BEACH, FL 33417	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D DE STEFANO, NANCY 207 OXFORD 100 WEST PALM BEACH FL 33417	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP D WASSERMAN, ARNOLD 101 OXFORD 100 WEST PALM BEACH, FL 33417	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PD ROSS, EDWARD J 201 OXFORD 100 WEST PALM BEACH FL 33417	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP PTD	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VD NYGARD, MARIE 204 OXFORD 100 WEST PALM BEACH FL 33417	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP SD	☒ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, Florida Statutes. I further certify that the information indicated on this report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Edward J. Ross EDWARD J. ROSS JAN. 25, 2006 (561) 615-6680 (561) 512-2273