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NONPROFIT  
CORPORATION  
ANNUAL REPORT  
1997



FLORIDA DEPARTMENT OF STATE  
**Sandra B. Mortham**  
Secretary of State  
DIVISION OF CORPORATIONS

FILED  
Mar 17 1997 8:00 am  
Secretary of State

DOCUMENT # 734720 (6)

1. Corporation Name

WATER GLADES 200 CONDOMINIUM ASSOCIATION, INC.

Principal Place of Business  
5550 NORTH OCEAN DRIVE  
SINGER ISLAND FL 33404-2552

Mailing Address  
5550 NORTH OCEAN DRIVE  
SINGER ISLAND FL 33404-2552



3. Date Incorporated or Qualified  
12/30/1975

3a. Date of Last Report  
04/08/1996

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip Country

28 Zip Country

4. FEI Number  
59-1632669

Applied For  
Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional  
Fee Required

6. Election Campaign Financing  
Trust Fund Contribution ☐

\$5.00 May Be  
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,  
Florida Statutes ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

JAY WHITE  
WALTON, LANTAFF, SHROEDER & CARSON  
1645 PALM BEACH LAKES BLVD  
WEST PALM BEACH FL 33401

81 Name

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

83

84 City

FL

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, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE DS  
NAME KAUFMAN, DORIS  
STREET ADDRESS 5550 N. OCEAN DR., #17A  
CITY-ST-ZIP SINGER ISL FL ☐ DELETE

TITLE DT  
NAME JOE HUGHES  
STREET ADDRESS 5550 N OCEAN DR, #4B  
CITY-ST-ZIP SINGER ISLAND FL ☐ DELETE

TITLE D  
NAME ALLAN LAFFER  
STREET ADDRESS 5550 N OCEAN DR APT. 5D  
CITY-ST-ZIP SINGER ISL FL ☐ DELETE

TITLE D  
NAME PETER CARBONE  
STREET ADDRESS 5550 N. OCEAN DR APT 12B  
CITY-ST-ZIP SINGER ISL FL ☐ DELETE

TITLE DP  
NAME SARA THOMAS  
STREET ADDRESS 5550 N. OCEAN DR., APT. 15A  
CITY-ST-ZIP SINGER ISLAND FL ☐ DELETE

TITLE D  
NAME MUIR, WILLIAM  
STREET ADDRESS 5550 N OCEAN DR APT 3B  
CITY-ST-ZIP SINGER ISLAND FL ☐ DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE DV  
1.2 NAME PALAZZO, JOHN  
1.3 STREET ADDRESS 5550 N. OCEAN DR. #17D  
1.4 CITY-ST-ZIP SINGER ISLAND FL 33404 ☐ Change ☐ Addition

2.1 TITLE  
2.2 NAME  
2.3 STREET ADDRESS  
2.4 CITY-ST-ZIP ☐ Change ☐ Addition

3.1 TITLE  
3.2 NAME  
3.3 STREET ADDRESS  
3.4 CITY-ST-ZIP ☐ Change ☐ Addition

4.1 TITLE  
4.2 NAME  
4.3 STREET ADDRESS  
4.4 CITY-ST-ZIP ☐ Change ☐ Addition

5.1 TITLE  
5.2 NAME  
5.3 STREET ADDRESS  
5.4 CITY-ST-ZIP ☐ Change ☐ Addition

6.1 TITLE  
6.2 NAME  
6.3 STREET ADDRESS  
6.4 CITY-ST-ZIP ☐ Change ☐ Addition

14. I do 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, changed, or on an attachment with an address.

CR2E037 (9/96)