

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Feb 21, 2002 8:00 am
Secretary of State

02-21-2002 90104 029 *****61.25

DOCUMENT # 742457

1. Entity Name

NORTHAMPTON O CONDOMINIUM ASSOCIATION, INC.

Principal Place of Business

Mailing Address

**301 NORTHAMPTON O
 CENTURY VILLAGE
 WEST PALM BEACH FL 33417
 US**

**301 NORTHAMPTON O
 CENTURY VILLAGE
 WEST PALM BEACH FL 33417
 US**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

59-1638739

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

**VALENTI, ELSIE
 301 NORTHAMPTON O
 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.

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

9. Election Campaign Financing
 Trust Fund Contribution. ☐

\$5.00 May Be
 Added to Fees

**Make Check Payable to
 Department of State**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE **DT** ☐ Delete
 NAME **WEISS, FAY**
 STREET ADDRESS **294 NORTHAMPTON O**
 CITY-ST-ZIP **WEST PALM BCH, FL 00000**

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE **VD** ☐ Delete
 NAME **ROWLAND, NORA**
 STREET ADDRESS **290 NORTHAMPTON O**
 CITY-ST-ZIP **WEST PALM BEACH FL**

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE **D** ☐ Delete
 NAME **ANISFELD, MARIE**
 STREET ADDRESS **286 NORTHAMPTON O**
 CITY-ST-ZIP **W. PALM BEACH FL**

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE **D** ☐ Delete
 NAME **WEISNER, PEARL**
 STREET ADDRESS **283 NORTHAMPTON O**
 CITY-ST-ZIP **WEST PALM BCH, FL 00000**

TITLE **DIRECTOR, SECRETARY** ☐ Change ☒ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE **SD** ☒ Delete
 NAME **LEVY, CHARLOTTE**
 STREET ADDRESS **300 NORTHAMPTON O**
 CITY-ST-ZIP **WEST PALM BCH, FL 00000**

TITLE **DIRECTOR** ☐ Change ☒ Addition
 NAME **CARVER, ANN**
 STREET ADDRESS **300 NORTHAMPTON O**
 CITY-ST-ZIP **WEST PALM BEACH, FL. 33417**

TITLE **PD** ☐ Delete
 NAME **VALENTI, ELSIE**
 STREET ADDRESS **301 NORTHAMPTON O**
 CITY-ST-ZIP **WEST PALM BCH, FL 00000**

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

12. 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 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: **EL SIG VALENTI**

Feb. 7, 2002

CR2E037 (9/01)