

FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT 1996



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

DOCUMENT # 742460 (9)

1. Corporation Name

WALTHAM H CONDOMINIUM ASSOCIATION, INC.



Principal Place of Business: WALTHAM H CV, 192 WEST PALM BEACH FL 34417-6934, US
Mailing Address: WALTHAM H CV, 192 WEST PALM BEACH FL 33417-6934, US

3. Date incorporated or Qualified: 04/14/1978
3a. Date of Last Report: 04/12/1995

2. Principal Place of Business: 21 WALTHAM H CV, Suite #, etc. 22 189, City & State: 23 W. Palm Beach FL, Zip: 24 334 17-6934
2a. Mailing Address: 26 WALTHAM H CV, Suite, Apt. #, etc. 27 189, City & State: 28 W. Palm Beach FL, Zip: 29 334 17-6934, 30 334 17-6934, 31 334 17-6934

4. FEI Number: 59-1748358
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: PARKER, JANET, 192 WALTHAM H CENTURY VILLAGE, WEST PALM BEACH FL 33417

10. Name and Address of New Registered Agent: 81 Name: E. AVIS/BLANK, 82 Street Address (P.O. Box Number is Not Acceptable): 189 WALTHAM H, 83 City: CENTURY VILLAGE, 84 City: WEST PALM BEACH, FL, 85 Zip Code: 334 17

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: *Avis E. Blank S/P* (NOTE: Registered Agent signature required when reinstating) DATE: 1/19/96

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE: T	NAME: PARKER, JANET	1.1 TITLE: T	1.2 NAME: OLGA BORGES
STREET ADDRESS: WALTHAM H-192 CENTURY VILLAGE	CITY-ST-ZIP: W. PALM BEACH FL	1.3 STREET ADDRESS: 186 WALTHAM H	1.4 CITY-ST-ZIP: WEST PALM BEACH FL 33417-6933
TITLE: D	NAME: SCHMIDT, JACK	2.1 TITLE:	2.2 NAME:
STREET ADDRESS: WALTHAM H-189, CEN VILL	CITY-ST-ZIP: WEST PALM BEACH, FL00000	2.3 STREET ADDRESS:	2.4 CITY-ST-ZIP:
TITLE: SD	NAME: BLANK, AVIS E.	3.1 TITLE:	3.2 NAME:
STREET ADDRESS: WALTHAM H 189	CITY-ST-ZIP: W. PALM BCH FL	3.3 STREET ADDRESS:	3.4 CITY-ST-ZIP:
TITLE: P	NAME: BLANK, MORRY	4.1 TITLE: P/D	4.2 NAME:
STREET ADDRESS: WALTHAM H 189	CITY-ST-ZIP: W. PALM BCH. FL	4.3 STREET ADDRESS:	4.4 CITY-ST-ZIP:
TITLE: VP	NAME: TEDESCO, SYLVIA	5.1 TITLE: VP/D	5.2 NAME:
STREET ADDRESS: WALTHAM H-178 CENTURY VILLAGE	CITY-ST-ZIP: W PALM BEACH FL	5.3 STREET ADDRESS:	5.4 CITY-ST-ZIP:
TITLE: P	NAME: KNIBERG, SYLVIA	6.1 TITLE:	6.2 NAME:
STREET ADDRESS: WALTHAM H-180 CENTURY VILLAGE	CITY-ST-ZIP: W PALM BEACH FL	6.3 STREET ADDRESS:	6.4 CITY-ST-ZIP:

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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.

SIGNATURE: *Morry Blank*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E037 (12/95)