Mailing Address

WALTHAM H CV

**NONPROFIT** CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

## **Katherine Harris**

Secretary of State DIVISION OF CORPORATIONS

## **DOCUMENT # 742460**

Principal Place of Business

WALTHAM H CV

WALTHAM H CONDOMINIUM ASSOCIATION, INC.

189 WEST PALM BEACH FL 34417-6934 US  189 WEST PALM BEACH FL 3(1417 US  US									
2. Principal Place of Business 2a. Mailing Address 26				3. Date Incorporated or Qualifec					
Suite, Apr. #, etc. Suite, Apt. #, etc.					4. FEI Number		App	plied For	
22	27			59-1748358		Not	/Applicable		
City & State		City & State	¬		5. Certifca e of Status Desired		\$8.75 Additional Fee Required		
Zip	Country	Zip	Country	,	6. Election Campaign Financing		\$5.00 May Be		
24	25 29 30				Trust Fund Contribution			Added to Fees	
	9. Name and Address of Current	Registered Agent	81	Name	10. Name and Address of New	Registered A	rgent		
			0,	Name					
BLANK, AVIS E 189 WALTHAM H			82	Street	Address (P.O. Box Number is Not Accep	table)			
CENTURY			83						
	M BEACH FL 33417		84	City		Fl.	85 Zip C	Code	
11. Pursuart to the provisions of Sections 617.0502 and 617.1508, Florida Statuties, 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, Seption 617.0503, Florida Statutes.  SIGNATURE:  Streety and or critical page and projectored agent									
Signature, typed or printed name of registered egent and title if applicable. (NOTE Regis 12. OFFICERS AND DIRECTORS				ni signature i	ADDITIONS/CHANGES TO O		D DIRECTO	R3 IN 12	
TITLE		DELETE	13.				Change	Addition	
NAME	TD		1,2 NAME						
	Jean Rubenstein 185 Waltham H		1.3 STREET ADDRESS						
STREET ADDRESS	100 HALITARI II		1.4 CITY- S					}	
CITY-ST-ZIP	W. PALM BEACH FL.	☐ DELETE	2.1 TITLE	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	D/VP		Change	☐ Addition	
NAME	-		2.2 NAME		_,				
STREET ADDRESS			2.3 STREE	T ADDRESS					
CITY-ST-ZIP				ST-ZIP					
TITLE			3.1 TITLE				☐ Change	☐ Addition	
NAME	BLANK, AVIS E.		3.2 NAME						
STREET ADDRESS	WALTHAM H 189		3.3 STREE	TADDRESS					
CITY-ST-ZIP			3.4. CITY-	ST-ZIP					
TITLE	PD	☐ DELETE	4.1 TITLE	,			Change	☐ Addition	
NAME	BLANK, MORRY		4. 2 NAME						
STREET ADDRESS			4.3 STREE	TADDRESS					
CITY-ST-ZIP			4.4 CITY-5	ST-ZIP					
TITLE	VPD	₩ DELETE	5.1 TITLE		D		Change	☐ Addition	
NAME			5.2 NAME		Hyman Rubenstein				
STREET ADDRESS	5 C		5.3 STREE	TADDRESS	105 Warbiidii II				
CITY-ST-ZIP	V PALM BEACH FL 5.41		5.4 CITY-5	ST- ZIP	West Palm Beach	FL 334	·		
TITLE	☐ DELETE 6.1		6.1 TITLE		and		Change	☐ Addition	

6.3 STREET ADDRESS

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 suppliemental 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, with a light empowered.

NAME

STREET ADDRESS

January

1999

FILED Apr 25, 1999 8:00 am Secretary of State

04-25-1999 90005 020 \*\*\*122.50

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