

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Mar 15, 2004 8:00 am
Secretary of State

03-15-2004 90016 017 ****61.25

DOCUMENT # 742742

1. Entity Name

ANDOVER K CONDOMINIUM ASSOCIATION, INC.



Principal Place of Business

C/O JENNIE SCHECHTER
259 ANDOVER K
WEST PALM BEACH FL 33417-2606

Mailing Address

C/O JENNIE SCHECHTER
259 ANDOVER K
WEST PALM BEACH FL 33417-2606

54018584



MOORE CR2E037 (11/03)

2. Principal Place of Business

Suite, Apt. #, etc.

3. Mailing Address

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

59-1636128

Applied For

Not Applicable

Zip

Country

Zip

Country

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

SCHECHTER, JENNIE
ANDOVER K-259
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, 2004

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

TITLE D
NAME BLAUSTEIN, ANDREW ☐ Delete
STREET ADDRESS 268 ANDOVER K
CITY-ST-ZIP WEST PALM BEACH FL 33417

TITLE P
NAME ROSENBERG, LILA ☐ Delete
STREET ADDRESS 260 ANDOVER K
CITY-ST-ZIP W PALM BCH FL

TITLE P
NAME BELEC, PIERRE ☐ Delete
STREET ADDRESS 271 ANDOVER K
CITY-ST-ZIP WEST PALM BEACH FL 33417

TITLE V
NAME CORBEIL, FRANCINE ☐ Delete
STREET ADDRESS 277 ANDOVER ER K
CITY-ST-ZIP WEST PALM BEACH FL 33417

TITLE T
NAME SCHECHTER, JENNIE ☐ Delete
STREET ADDRESS ANDOVER K-259 CEN VILL
CITY-ST-ZIP W PALM BEACH FL

TITLE D
NAME LENNO, ROBERT ☐ Delete
STREET ADDRESS 272 AN DOVEK
CITY-ST-ZIP WEST PALM BEACH FL 33417

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE D ☐ Change ☒ Addition
NAME ST. MARIE, MARCEL
STREET ADDRESS 274 ANDOVER K
CITY-ST-ZIP WEST PALM BEACH, FL 33417

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

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

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

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

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:

Jennie Schechter
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

JENNIE SCHECHTER 3/1/04 561-689-8128
Date Daytime Phone #