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Mar 06 1997 8:00am
Secretary of StateNONPROFIT
CORPORATION
ANNUAL REPORT
1997FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 742762 (8)

1. Corporation Name

EASTHAMPTON D CONDOMINIUM ASSOCIATION, INC.



Principal Place of Business

Mailing Address

78 EASTHAMPTON D
WEST PALM BEACH FL 3341778 EASTHAMPTON D
WEST PALM BEACH FL 33417-19133. Date Incorporated or Qualified
05/08/19783a. Date of Last Report
04/02/1996

4. FEI Number

59-1635195

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 Fees8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes

Yes



No

2. Principal Place of Business

2a. Mailing Address

21

26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

City & State

City & State

23

28

Zip

Country

Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

LEFKOWITZ, ROSALIND
78 EASTHAMPTON D
W PALM BCH FL 33409

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

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE D ☐ DELETE
NAME FEIFER, MORRIS LEW
STREET ADDRESS 92 EASTHAMPTON D
CITY-ST-ZIP W PALM BCH, FL 0000011 TITLE ☐ Change ☐ Addition
12 NAME
13 STREET ADDRESS
14 CITY-ST-ZIPTITLE V ☐ DELETE
NAME YODIN, NAT
STREET ADDRESS 73 EASTHAMPTON D
CITY-ST-ZIP WEST PALM BEACH FL21 TITLE ☐ Change ☐ Addition
22 NAME
23 STREET ADDRESS
24 CITY-ST-ZIPTITLE VPD ☐ DELETE
NAME DA STALFO, ELIZABETH
STREET ADDRESS 77 EASTHAMPTON D
CITY-ST-ZIP WEST PALM BEACH FL31 TITLE ☐ Change ☐ Addition
32 NAME
33 STREET ADDRESS
34 CITY-ST-ZIPTITLE D ☐ DELETE
NAME LEFKOWITZ, ROSALIND
STREET ADDRESS 781 EASTHAMPTON D
CITY-ST-ZIP W PALM BCH, FL 000004.1 TITLE ☐ Change ☐ Addition
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIPTITLE S ☐ DELETE
NAME BERBLITT, HENRITTA
STREET ADDRESS 81 EASTHAMPTON D
CITY-ST-ZIP W PALM BCH, FL 000005.1 TITLE ☐ Change ☐ Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIPTITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP6.1 TITLE ☐ Change ☐ Addition
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

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 if changed, or on an attachment with an address.

SIGNATURE: Morris Lew Feifer - MORRIS LEW FEIFER

2/28/97

683-5091

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone # 0038347

CR2E037 (9/96)