2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Apr 12, 2005 8:00 am
Secretary of State
04-12-2005 90140 014 ****61.25

DOCUMENT # 742778

1. Entity Name

NORTHAMPTON K CONDOMINIUM ASSOCIATION, INC.

Principal Place of Business	Mailing Address
213 NORTHAMPTON K WEST PALM BEACH FL 33417	213 NORTHAMPTON K WEST PALM BEACH FL 33417

1st MOORE CR2E037 (10/04)

2. Principal Place of Business

Suite, Apt. #, etc.

City & State

Zip Country

3. Mailing Address

SEACREST SERVICES, INC.
2400 CENTRE PARK W. DRIVE
#175
WEST PALM BEACH, FL 33409

4. FEI Number 59-1639026 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

SORKIN, MARILYN R
213 NORTHAMPTON K
WEST PALM BEACH FL 33417

7. Name and Address of New Registered Agent

Name PETROGLIA ANTHONY

Street Address (P.O. Box Number is Not Acceptable) 220 - NORTHAMPTON K

City WPB **FL** Zip Code 33417

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] 3/23/05
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, 2005

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			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PD SORKIN, MARILYN 213 NORTHAMPTON K WEST PALM BEACH FL 33417	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PRES ANTHONY PETROGLIA 220-NORTHAMPTON K WPB FL 33417	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	TD WEINSTEIN, IRVING 208 NORTHAMPTON K WEST PALM BEACH FL 33417	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	V.P REX WILIE 210 NORTHAMPTON K WPB FL 33417	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	SD WEINSTEIN, MILDRED 208 NORTHAMPTON K WEST PALM BEACH FL 33417	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	TR JOHN MCKEEGAN 216-NORTHAMPTON K WPB FL 33417	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D ANDREATTA, ANNA 218 NORTHAMPTON K WEST PALM BEACH FL 33417	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	SECTY LUCY MECHALI 207-NORTHAMPTON WPB FL 33417	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	DIR MARILY SORKIN 213-NORTHAMPTON K W.P.B FL 33417	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition

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: [signature] 3/23/05 561-471-5948
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #