

# 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Feb 21, 2006 8:00 am**  
**Secretary of State**

02-21-2006 90019 035 \*\*\*\*61.25

**60020390**



01202006 Chg-NP CR2E037 (11/05)

<b>DOCUMENT # 742781</b> 1. Entity Name NORWICH A CONDOMINIUM ASSOCIATION, INC.					
Principal Place of Business NORWICH A-5 CENTURY VILLAGE WEST PALM BEACH, FL 33417 US			Mailing Address SEACREST SERVICES, INC 2400 CENTRE PARK W DRIVE STE 175 WEST PALM BEACH, FL 33417 US		
2. Principal Place of Business		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State		4. FEI Number 59-1626075	
Zip		Country		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent				7. Name and Address of New Registered Agent	
KERNER, JEROME L 5 NORWICH A 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 <u>JEROME L KERNER</u> <u>Jerome L. Kerner</u> <u>2/6/06</u> <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>					
<b>Filing Fee is \$61.25</b> <b>Due by May 1, 2006</b>			9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees		
<b>Make check payable to Florida Department of State</b>					
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE NAME STREET ADDRESS CITY - ST - ZIP	PD KERNER, JEROME L. NORWICH A-5 WEST PALM BEACH, FL		TITLE NAME STREET ADDRESS CITY - ST - ZIP	D WOESSNER, JOHN 1 NORWICH A WEST PALM BEACH FL	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	V HELM, RONALD 15 NORWICH A WEST PALM BEACH, FL 33417		TITLE NAME STREET ADDRESS CITY - ST - ZIP		
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D BLOCK, STEPHEN 16 NORWICH A WEST PALM BEACH, FL 33417		TITLE NAME STREET ADDRESS CITY - ST - ZIP		
TITLE NAME STREET ADDRESS CITY - ST - ZIP	SD KERNER, SHIRLEY NORWICH A-5 WEST PALM BEACH, FL		TITLE NAME STREET ADDRESS CITY - ST - ZIP		
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D HYMAN, OSCAR NORWICH A-15 WEST PALM BEACH, FL		TITLE NAME STREET ADDRESS CITY - ST - ZIP		
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D WOESSNER, CATHERINE 1 NOWICH A WEST PALM BEACH, FL 33417		TITLE NAME STREET ADDRESS CITY - ST - ZIP		
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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: <u>Jerome L. Kerner</u> <u>2/11/06</u> <u>689-3499</u> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>					