

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 17, 1997
AMOUNT DUE ON OR BEFORE 9/17/97: \$61.25 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$236.25).

NONPROFIT
CORPORATION
ANNUAL REPORT
1997



FLORIDA DEPARTMENT OF STATE
Sandra B. Morham
Secretary of State
DIVISION OF CORPORATIONS

FILED
Sep 03 1997 8:00am
Secretary of State

DOCUMENT # 742802 (2)

1. Corporation Name

WALTHAM G CONDOMINIUM ASSOCIATION, INC.

Principal Place of Business
147 WALTHAM, G
CENTURY VILLAGE
WEST PALM BEACH FL 33417
US

Mailing Address
147 WALTHAM, G
CENTURY VILLAGE
WEST PALM BEACH FL 33417
US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified 05/08/1978 3a. Date of Last Report 03/06/1996

4. FEI Number 59-1602934 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 Fees

8. This corporation owes or has paid the current year intangible Personal Property Tax due June 30. ☐ Yes ☐ No

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip Country

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip Country

9. Name and Address of Current Registered Agent

SCACCIAOCE, TOM
173 WELLINGTONS, J
CENTURY VILLAGE
WEST PALM BEACH FL 33417

10. Name and Address of New Registered Agent

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

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	DELETE
PD	SCACCIAOCE, TOM	173 WELLINGTON, J	WEST PALM BEACH FL	☒
VD	WERNER, ROSE	WALTHAM G, 162-CEN VILL	WEST PALM BCH FL	☒
SD	YOUNG, VIRGINIA	221 BEDFORD, I	WEST PALM BEACH FL	☒
TD	CHONTOW, GUSSIE	WALTHAM G - 147 CEN VILLE	WEST PALM BEACH FL	☒
				☐
				☐
	NORMAN GANCAER	5291 TIFFANY ANN CIRCLE	WEST PALM BCH, FLA 33417	☐

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	1.2 NAME	1.3 STREET ADDRESS	1.4 CITY-ST-ZIP	2.1 TITLE	2.2 NAME	2.3 STREET ADDRESS	2.4 CITY-ST-ZIP	3.1 TITLE	3.2 NAME	3.3 STREET ADDRESS	3.4 CITY-ST-ZIP	4.1 TITLE	4.2 NAME	4.3 STREET ADDRESS	4.4 CITY-ST-ZIP	5.1 TITLE	5.2 NAME	5.3 STREET ADDRESS	5.4 CITY-ST-ZIP	6.1 TITLE	6.2 NAME	6.3 STREET ADDRESS	6.4 CITY-ST-ZIP
P	NORMAN GANCAER	5291 TIFFANY ANN CIRCLE	W.P. BEACH, FL 33417	TRPA	CLIFFORD YOUNG	164 WALTHAM G	W.P. BEACH, FL 33417	D	ANNAETTE MILLER	164 WALTHAM G	WEST PALM BEACH, FL 33417	D	GUSSIE CHONTOW	147 WALTHAM G	W.P. BEACH, FL 33417	D	ROSE WERNER	162 WALTHAM G	W.P. BEACH, FL 33417				

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 SIGNATURE REQUIRED

CR2E037 (4/97)