2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Aug 08, 2005 8:00 am
Secretary of State
08-08-2005 90044 023 ****61.25

DOCUMENT # 742802

1. Entity Name
WALTHAM G CONDOMINIUM ASSOCIATION, INC.

50060278

Principal Place of Business	Mailing Address
RUTH FINKELMAN 155 WALTHAM G-158 WEST PALM BEACH, FL 33417 US	RUTH FINKELMAN 155 WALTHAM G-158 WEST PALM BEACH, FL 33417 US

2. Principal Place of Business: MICHAEL PERREAULT
Suite, Apt. #, etc.: 159 WALTHAM G
City & State: WPB, FL
Zip: 33417
Country:

3. Mailing Address: SEACREST SERVICES, INC
2400 Center Park W. Drive
Suite 175
West Palm Beach, FL 33409-6405

17272005 Chg-NP CR2E037 (10/03)

FEI Number: 59-1602934 ☐ Applied For ☐ Not Applicable

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

6. Name and Address of Current Registered Agent

NUVIA, ANNE
167 WALTHAM G
WEST PALM BEACH, FL 33417

MICHAEL PERREAULT
159 WALTHAM G
WPB, FL 33417

7. Name and Address of New Registered Agent

Name: MICHAEL PERREAULT
Street Address (P.O. Box Number is Not Acceptable): 159 WALTHAM G
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: MICHAEL PERREAULT Michael Perreault 7-29-05
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

Filing Fee is $61.25
Due by September 7, 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	VD KAPLAN, SID 156 WALTHAM G WEST PALM BEACH, FL 33417	☑ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	P.S.D MICHAEL PERREAULT 159 WALTHAM G WPB, FL 33417	☑ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PT NOVIA, ANNE 167 WALTHAM G WEST PALM BEACH, FL 33417	☑ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	TD TOM RYAN 157 WALTHAM G WPB, FL 33417	☑ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VD ANTOKAL, HOWARD 180 WALTHAM G WEST PALM BEACH, FL 33417	☑ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VP PAUL MCLOUGHLIN 146 WALTHAM G WPB, FL 33417	☑ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	SD CHONTON, GUSSIE 147 WALTHAM G WEST PALM BEACH, FL 33417	☑ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D ANNETTE MILLER 164 WALTHAM G	☑ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ 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: MICHAEL PERREAULT Michael Perreault 7-29-05
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #