

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 742802

FILED
Apr 03, 2009
Secretary of State

Entity Name: WALTHAM G CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

MICHAEL PERREAULT
159 WALTHAM G
WEST PALM BEACH, FL 33417 US

New Principal Place of Business:

159 WALTHAM G
WEST PALM BEACH, FL 33417 US

Current Mailing Address:

SEACREST SERVICES, INC
2400 CENTER PARK W DRIVE, SUITE 175
WEST PALM BEACH, FL 334096405 US

New Mailing Address:

SEACREST SERVICES INC
2400 CENTREPARK W DR #175
WEST PALM BEACH, FL 33409 US

FEI Number: 59-1602934

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PERREAULT, MICHAEL
159 WALTHAM G
WEST PALM BEACH, FL 33417 US

Name and Address of New Registered Agent:

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.

SIGNATURE: _____

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PSD () Delete
Name: PERREAULT, MICHAEL
Address: 159 WALTHAM G
City-St-Zip: WEST PALM BEACH, FL 33417

Title: TD () Delete
Name: MCDONALD, THOMAS
Address: 168 WALTHAM G
City-St-Zip: WEST PALM BEACH, FL 33417

Title: VD () Delete
Name: ANKARBERG, MARK
Address: 152 WALTHAM G
City-St-Zip: WEST PALM BEACH, FL 33417

Title: D () Delete
Name: CHARES, CARMEN
Address: 160 WALTHAM G
City-St-Zip: WEST PALM BEACH, FL 33417

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: PERREAULT, MICHAEL
Address: 159 WALTHAM G
City-St-Zip: WEST PALM BEACH, FL 33417 US

Title: VP (X) Change () Addition
Name: ANKARBERG, MARK
Address: 152 WALTHAM G
City-St-Zip: WEST PALM BEACH, FL 33417 US

Title: T (X) Change () Addition
Name: MCDONALD, THOMAS
Address: 168 WALTHAM G
City-St-Zip: WEST PALM BEACH, FL 33417 US

Title: S (X) Change () Addition
Name: GERENA, CARMEN M
Address: 160 WALTHAM G
City-St-Zip: WEST PALM BEACH, FL 33417 US

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: GALE CORONA

MS

04/03/2009

Electronic Signature of Signing Officer or Director

Date