


2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Feb 04, 2004 08:00 AM
Secretary of State

| | | | | | |
|---|--|---------|---|---|--|
| DOCUMENT # 742806 1. Entity Name WINDSOR D CONDOMINIUM ASSOCIATION, INC. | | | |  | |
| Principal Place of Business 66 WINDSOR D CENTURY VILLAGE WEST PALM BEACH FL 33417 | | | Mailing Address 66 WINDSOR D CENTURY VILLAGE WEST PALM BEACH FL 33417 | | |
| 2. Principal Place of Business Suite, Apt. #, etc. | | | 3. Mailing Address Suite, Apt. #, etc. | | |
| City & State | | | City & State | | |
| Zip | | Country | | Zip | |
| Country | | Country | | 4. FEI Number 59-2182690 | |
| 5. Certificate of Status Desired <input type="checkbox"/> | | | | Applied For Not Applicable | |
| 6. Name and Address of Current Registered Agent BERNSTEIN, DAVID 66 WINDSOR D WEST PALM BEACH FL 33417 | | | | 7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City | |
| 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. | | | | \$8.75 Additional Fee Required | |
| SIGNATURE _____ <small>Signature, typed or printed name of registered agent and title if applicable</small> | | | | (NOTE: Registered Agent signature required when reinstating) | |
| FILE NOW: FEE IS \$61.25 Due By May 1, 2004 | | | | 9. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> | |
| \$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 BERNSTEIN, DAVID 66 WINDSOR D WEST PALM BEACH FL 33417 | | | <input type="checkbox"/> Delete | |
| TITLE NAME STREET ADDRESS CITY - ST - ZIP | VPD PIACENTE, DOROTHY 81 WINDSOR D WEST PALM BEACH FL | | | <input type="checkbox"/> Delete | |
| TITLE NAME STREET ADDRESS CITY - ST - ZIP | SD TARLOV, LOIS 88 WINDSOR D WEST PALM BEACH FL 33417 | | | <input type="checkbox"/> Delete | |
| TITLE NAME STREET ADDRESS CITY - ST - ZIP | TD GEVERCER, HARRY 80 WINDS ORD WEST PALM BEACH FL 33417 | | | <input type="checkbox"/> Delete | |
| TITLE NAME STREET ADDRESS CITY - ST - ZIP | <input type="checkbox"/> Delete | | | <input type="checkbox"/> Change <input type="checkbox"/> Addition | |
| TITLE NAME STREET ADDRESS CITY - ST - ZIP | <input type="checkbox"/> Delete | | | <input type="checkbox"/> Change <input type="checkbox"/> Addition | |



MOORE CR2E037 (11/03)

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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: David Bernstein DAVID BERNSTEIN 2/1/04 561-683-0869