

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Feb 07, 2007 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 - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

59-2182690

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

1st MOORE

CR2E037 (10/06)

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

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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when re-registering)

DATE

FILE NOW: FEE IS \$61.25
Due By May 1, 2007

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

TITLE	PD	<input type="checkbox"/> Delete
NAME	BERNSTEIN, DAVID	
STREET ADDRESS	66 WINDSOR D	
CITY-STATE-ZIP	WEST PALM BEACH FL 33417	
TITLE	VPD	<input type="checkbox"/> Delete
NAME	PIACENTE, DOROTHY	
STREET ADDRESS	81 WINDSOR D	
CITY-STATE-ZIP	WEST PALM BEACH FL	
TITLE	SD	<input type="checkbox"/> Delete
NAME	TARLOV, LOIS	
STREET ADDRESS	88 WINDSOR D	
CITY-STATE-ZIP	WEST PALM BEACH FL 33417	
TITLE	TD	<input type="checkbox"/> Delete
NAME	GEVERCER, HARRY	
STREET ADDRESS	80 WINDSOR ORD	
CITY-STATE-ZIP	WEST PALM BEACH FL 33417	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-STATE-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-STATE-ZIP		

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	U00000625471
CITY-STATE-ZIP	02/14/07-80076-020 61.25
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-STATE-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-STATE-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-STATE-ZIP	

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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:

David Bernstein

2/3/07 561-683-0889