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NONPROFIT CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # 767561

1. Corporation Name

GARDENWAY CONDOMINIUM A, B, C, D AND E MAINTENANCE ASSOCIATION, INC.

Principal Place of Business

12030 ALTERNATE A-1-A UNIT A-99 PALM BEACH GARDENS FL 33410 US

Mailing Address

ASSOC. PROPTY MGNT. 400 SO DIXIE HIGHWAY STE 10 LAKE WORTH FL 33460 US



2. Principal Place of Business

21 Suite, Apt. #, etc.

23 City & State

24 Zip 25 Country

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip 29 Country 30

3. Date Incorporated or Qualified

03/21/1983

4. FEI Number

59-1555511

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

9. Name and Address of Current Registered Agent

ASSOCIATED PROPERTY MGME OF PALM BEACHES I 400 SOUTH DIXIE HIGHWAY SUITE #10 LAKE WORTH FL 33460

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 PD DELETED

NAME REUPKE, MARIA STREET ADDRESS 12036 ALTERNATE A1A, 4B-C CITY-ST-ZIP PALM BEACH GARDENS FL

TITLE SD DELETED

NAME WILBUR, JANET STREET ADDRESS 12052 ALTERNATE A1A, #C-4 CITY-ST-ZIP PALM BEACH GARDENS FL

TITLE ID DELETED

NAME EPPLER, ESTHER STREET ADDRESS 12052 ALT. A1A, STE C-6 CITY-ST-ZIP PALM BEACH GARDENS FL

TITLE DELETED

NAME STREET ADDRESS CITY-ST-ZIP

TITLE DELETED

NAME STREET ADDRESS CITY-ST-ZIP

TITLE DELETED

NAME STREET ADDRESS CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE Change Addition

1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP

2.1 TITLE Change Addition

2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP

3.1 TITLE ID Change Addition

3.2 NAME Nancy Saenz 3.3 STREET ADDRESS 12030 Alt. A1A, #A-3 3.4 CITY-ST-ZIP PBG, FL

4.1 TITLE Change Addition

4.2 NAME Sibyl Cook 4.3 STREET ADDRESS 12052 Alt. A1A, #C-1 4.4 CITY-ST-ZIP PBG, FL

5.1 TITLE Change Addition

5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP

6.1 TITLE Change Addition

6.2 NAME 6.3 STREET ADDRESS 6.4 CITY-ST-ZIP

14. 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 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, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (1/98)