## FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT

1998

CAMPBELL, THERESA

JUPITER FL 33477

900 EAST INDIANTOWN RD., STE 210



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State **DIVISION OF CORPORATIONS** 

DOCUMENT # N01205

(6)

## WHITEHALL CONDOMINIUMS AT CAMINO REAL ASSOCIATIO

N, INC.		THE POOL				
Principal Place of Business		Malling Address		E TODALIST DEL BETOL TIDIO MOLL BETOL BAND BAND QUALL DIBAY OLDIN BAND DADIL I		
PO BOX 3036 TEQUESTA FL 33	3469	PO BOX 3038 TEOUESTA FL 33469		3. Date incorporated or Qualified 02/02/1984		
				4. FEI Number 59-2368909	Applied F Not Applie	
2. Principal Pla	ce of Business	2a. Mailing Address	····	5. Certificate of Status Desired	\$8.75 Addition	
Suite, Apt. #, etc.		Suite, Apt. #, etc.		Election Campaign Financing     Trust Fund Contribution	\$5.00 May Be Added to Fees	
City & State		City & State		7. Is this nonprofit corporation a homeowners association?		
Zip	Country 25	Zip 29	Country 30	This corporation owes or has pald the operation Property Tax due June 30.	current year Intangible	
	9. Name and Address of C	urrent Registered Agent		10. Name and Address of New Registers	d Agent	
			81 Name			

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.

83

SIGNATURE .					
	Signature, typed or printed name of registered agent and title if			required when reinstating) DATE	
12.	OFFICERS AND DIRECT		13.	ADDITIONS/CHANGES TO OFFICERS AN	
TITLE	DVP	☐ DELETE	1.1 TITLE	D MINTE 0 008647	Change Maddition
NAME	CHARLES MESSINA		1.2 NAME	MINTER ROBERT 6157 BALBON CIRCYOU BOCK PATON FL	
STREET ADDRESS	6193 BALBOA CIRCLE, #302		1.3 STREET ADDRESS	6157 BALBON CIRY404	
CITY-ST-ZIP	BOCA RATON FL		1.4 City-ST-ZIP	BOCK BATON FL	
TITLE	DVP	☐ DELETE	2.1 TITLE		Change Addition
NAME	GUELLA, JOSEPHINE J		2.2 NAME		
STREET ADDRESS	6061 BALBOA CIR., #101		2.3 STREET ADDRESS		
CITY-ST-ZIP	BOCA RATON FL		2.4 CITY-ST-ZIP		
TITLE	D	☐ DELETE	3.1 TITLE		Change Addition
NAME	MEYN, CHARLES		3.2 NAME		
STREET ADDRESS	6145 BALBOA CIR 205		3.3 STREET ADDRESS		
CITY-ST-ZWP	BOCA RATON FL		3.4. CITY - ST - ZIP		
TITLE	DS	DELETE	4.1 TITLE	PD	Change Addition
NAME	Parisi, Carmela		4. 2 NAME	BOCHETTO MICHAEL 6025 BALBOA CIRCLE 306	
STREET ADDRESS	6073 BALBOA CIRCLE		4.3 STREET ADDRESS	6025 BACBON CIT	
CITY-ST-ZIP	BOCA RATON FL		4.4 CITY-ST-ZIP	BOCA RATON FE	
TITLE	DT	☐ DELETE	5.1 TITLE	•	Change Addition
NAME	BAUN, MILDRED	:	5.2 NAME	BALIN, MILDRED	PRRECTION
STREET ADDRESS	6085 BALBOA CIRCLE, #205		5.3 STREET ADDRESS	04,211	-ONCOME FOR
CITY-ST-ZIP	BOCA RATON FL		5.4 CITY-ST-ZIP		
TITLE	DS	☐ DELETE	6.1 TITLE		Change Addition
NAME	ROOD, LAURA J.		6.2 NAME	ROOD, LAURATEAN	/
STREET ADDRESS	6037 BALBOA CIRCLE 404	i	6.3 STREET ADDRESS	(000)	OLREGOD

**BOCA RATON FL** 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 rustee 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 attachministry the acadress.

SIGNATURE:

4/10/98 56/39/-3659

**SIGNATURE:** 

10/98 56/ 39/-3659

Street Address (P.O. Box Number is Not Acceptable)

Applied For Not Applicable \$8.75 Additional Fee Required \$5.00 May Be Added to Fees

Zip Code

**FILED** 

Apr 15 1998 8:00am

Secretary of State