

2006 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT**FILED**
Nov 01, 2006
Secretary of State

DOCUMENT# N05000005951

Entity Name: THE HELM CONDOMINIUM ASSOCIATION, INC.**Current Principal Place of Business:**5201 VILLAGE BLVD.
WEST PALM BEACH, FL 33407**New Principal Place of Business:**753 HUMMINGBIRD WAY
NORTH PALM BEACH, FL 33408**Current Mailing Address:**5201 VILLAGE BLVD.
WEST PALM BEACH, FL 33407**New Mailing Address:**225 SOUTHERN BLVD
202
WEST PALM BEACH, FL 33405**FEI Number:** 20-3180024**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired ()****Name and Address of Current Registered Agent:**NEEDLE, ROBERT
5201 VILLAGE BLVD.
WEST PALM BEACH, FL 33407 US**Name and Address of New Registered Agent:**TOUCHSTONE WEBB MANAGEMENT, INC.
225 SOUTHERN BLVD
202
WEST PALM BEACH, FL 33405 US

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: KATHLEEN SALATA

11/01/2006

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: DP () Delete
Name: NEEDLE, ROBERT
Address: 5201 VILLAGE BLVD.
City-St-Zip: WEST PALM BEACH, FL 33407

Title: DVP () Delete
Name: HAMITON, JR., HARRY S
Address: 5201 VILLAGE BLVD.
City-St-Zip: WEST PALM BEACH, FL 33407

Title: DST () Delete
Name: WARWICK, WILLIAM R
Address: 5201 VILLAGE BLVD.
City-St-Zip: WEST PALM BEACH, FL 33407

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DP (X) Change () Addition
Name: WILSON, GAINES
Address: 225 SOUTHERN BLVD, #202
City-St-Zip: WEST PALM BEACH, FL 33405

Title: DVP (X) Change () Addition
Name: HAMITON, JR., HARRY S
Address: 225 SOUTHERN BLVD, #202
City-St-Zip: WEST PALM BEACH, FL 33405

Title: DST (X) Change () Addition
Name: MONICO, JOSEPH
Address: 225 SOUTHERN BLVD, #202
City-St-Zip: WEST PALM BEACH, FL 33405

I hereby certify that the information supplied with this filing does not qualify for the 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: KATHLEEN SALATA

CAM

11/01/2006

Electronic Signature of Signing Officer or Director

Date