


FILE NOW: FILING FEE IS \$61.25

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**Apr 01 1998 8:00am
Secretary of State**

NONPROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # N09699 (2)

1. Corporation Name
THE PARK AT WINDWOOD CONDOMINIUM II ASSOCIATION, INC.



Principal Place of Business 3139 & 3149 MILLWOOD TERRACE BOCA RATON FL 33431 US	Mailing Address 3149 MILLWOOD TERRACE BOCA RATON FL 33431
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3. Date Incorporated or Qualified 06/12/1985		
4. FEI Number 59-2542996	Applied For <input type="checkbox"/>	Not Applicable <input type="checkbox"/>
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required	
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees	
7. Is this nonprofit corporation a homeowners association? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		
8. This corporation owes or has paid the current year intangible Personal Property Tax due June 30. <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		

2. Principal Place of Business 21	2a. Mailing Address 26
Suite, Apt. #, etc. 22	Suite, Apt. #, etc. 27
City & State 23	City & State 28
Zip 24	Country 25
Zip 29	Country 30

9. Name and Address of Current Registered Agent

**WADE, LYNN
3139 MILLWOOD TERRACE #M-125
BOCA RATON FL 33431**

10. Name and Address of New Registered Agent

81 Name McDaniel, Teddy		
82 Street Address (P.O. Box Number is Not Acceptable) 3149 Millwood Terr #M-117		
83		
84 City Boca Raton	85 State FL	86 Zip Code 33431

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: *Sandra B. Mortham* **3-1-98**

(NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS

TITLE	VD	<input checked="" type="checkbox"/> DELETE
NAME	BRUNO, BARBRA	
STREET ADDRESS	3139 MILLWOOD TERRACE M-125	
CITY-ST-ZIP	BOCA RATON FL	
TITLE	STD	<input checked="" type="checkbox"/> DELETE
NAME	BELZESKI, ELAINE	
STREET ADDRESS	3149 MILLWOOD TERR #217	
CITY-ST-ZIP	BOCA RATON FL	
TITLE	PD	<input checked="" type="checkbox"/> DELETE
NAME	WADE, LYNN	
STREET ADDRESS	3139 MILLWOOD TERR #125	
CITY-ST-ZIP	BOCA RATON FL	
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	P/D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
1.2 NAME	McDaniel, Teddy N.	
1.3 STREET ADDRESS	3149 Millwood Terr. #M-117	
1.4 CITY-ST-ZIP	Boca Raton, FL 33431	
2.1 TITLE	S/T/D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
2.2 NAME	Bruno, Barbra	
2.3 STREET ADDRESS	3149 Millwood Terr. #M-222	
2.4 CITY-ST-ZIP	Boca Raton, FL 33431	
3.1 TITLE	D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
3.2 NAME	Pecille, Scott	
3.3 STREET ADDRESS	3139 Millwood Terr. #M-126	
3.4 CITY-ST-ZIP	Boca Raton, FL 33431	
4.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME		
4.3 STREET ADDRESS		
4.4 CITY-ST-ZIP		
5.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME		
5.3 STREET ADDRESS		
5.4 CITY-ST-ZIP		
6.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> 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)(l), 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.

SIGNATURE: *Sandra B. Mortham* **3-1-98**

CR2E037 (10/97)