### **FILE NOW: FILING FEE IS \$61.25**

NONPROFIT CORPORATION **ANNUAL REPORT** 

1999



FLORIDA DEPARTMENT OF STATE

#### **Katherine Harris**

Secretary of State **DIVISION OF CORPORATIONS** 

# DOCUMENT # N31284

## WEST PALM BEACH HOUSING DEVELOPMENT, INC.

Country

Principal Place of Business 3484 SUMMER STREET #5 LAKE WORTH FL 33461 US

2. Principal Place of Business

Suite, Apt. #, etc.

City & State

21

Mailing Address

2a. Mailing Address

City & State

Zip

Suite, Apt. #, etc.

3484 SUMMER STREET #5 LAKE WORTH FL 33461

US

26

27

28

# May 05, 1999 8:00 am secretary of State

05-05-1999 90200 045 \*\*\*\*70.00



X

3. Date Incorporated or Qualifed

5. Certifcate of Status Desired

6. Election Campaign Financing

03/21/1989

52-1642176

4. FEI Number

24	25	29	30		Trust Fund Cor	ntribution	Added to	Fees	
9. Name and Address of Current Registered Agent					10. Name and Address of New Registered Agent				
LAMBERT, ROGER C. ESQ. 2247 PALM BEACH LAKES BLVD #237 WEST PALM BEACH FL 33409				83 84 City	NEST PALM	BEACH	PRIVE	ode (1	
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 flar filliar 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)									
12.		CERS AND DIRECTORS	(NOTE: Re	13.		ANGES TO OFFICERS	AND DIRECTOR	S IN 12	
TITLE	PD		DELETE	1.1 TITLE	PTO	1 ···· = 3 ·	Change	Addition	
NAME	LAMBERT, ROGER C			1.2 NAME	WESLEY BEN	とうて	_		
STREET ADDRESS		SS		1.3 STREET ADDRESS	3555 TOOT	TERS DRIVE			
CITY-ST-ZIP	WEST PALM BEACH F			1.4 CITY-ST-ZIP	ALPHARETT		30004		
TITLE	D		☐ DELETE	2.1 TITLE	F F 73	-,,	. ☐ Change	Addition	
NAME	LESEMAN, BILL			2.2 NAME	Track Contract	والمراجع والمراجع فللما	· ''		
STREET ADDRESS		RCLE STE 2050		2.3 STREET ADDRESS	1	AL CHAN			
CITY-ST-ZIP	ATLANTA GA 30339			2. 4 CITY-ST-ZIP			<u> </u>		
TITLE	TD		<b>EXQ</b> ELETE	3.1 TITLE	-D .		Change	Addition	
NAME	WALDMAN, GLEN	•		3.2 NAME	DAVID-02	NEK B.			
STREET ADDRESS				3.3 STREET ADDRESS	615 NORTH OCEAN BOLLENARD				
CITY-ST-ZIP	WEST PALM BEACH F			3.4. CITY-ST-ZIP	DELRAY B	EACH, FL	3348	3	
TITLE			☐ DELETE	4.1 TITLE		•	☐ Change	Addition	
NAME	,			4. 2 NAME					
STREET ADDRESS				4.3 STREET ADDRESS					
CITY-ST-ZIP				4.4 CITY-ST-ZIP					
TITLE			☐ DELETE	5.1 TITLE			☐ Change	☐ Addition	
NAME				5.2 NAME					
STREET ADDRESS				5.3 STREET ADDRESS					
CITY-ST-ZIP				5.4 CITY-ST-ZIP					
TITLE			☐ DELETE	6.1 TITLE			Change	☐ Addition	
NAME				6.2 NAME				{	
STREET ADDRESS				6.3 STREET ADDRESS				}	
CITY-ST-ZIP				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									

Country

indicated on this annual report or supplemental curate and that my signature shall have the same legal effect as if made under oath; that I am ar - execute this report as required by Chapter 617, Florida Statutes; and that my name appears in all other like empowered. officer or director of the corporation Block 12 or Block 13 if changed or

SIGNATURE:

CR2E037

Applied For

\$8,75 Additional

Fee Required

\$5.00 May Be

Not Applicable