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Apr 28 1998 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1998



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # N38780 (5)
1. Corporation Name
SHEFFIELD Q CONDOMINIUM ASSOCIATION, INC.



Principal Place of Business: SHEFFIELD Q - CV, W PALM BCH FL 33417, US
Mailing Address: EPSTEIN, SHIRLEY, 347 SHEFFIELD, W PALM BCH FL 33417-1550, US

3. Date Incorporated or Qualified: 06/22/1990
4. FEI Number: 59-2359970
5. Certificate of Status Desired: \$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution: \$5.00 May Be Added to Fees
7. Is this nonprofit corporation a homeowners association? Yes No
8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes No

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

9. Name and Address of Current Registered Agent
EPSTEIN, SHIRLEY
397 SHEFFIELD
WEST PALM BEACH FL 33417

10. Name and Address of New Registered Agent
81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City
85 Zip Code: FL

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	P	<input type="checkbox"/> DELETE
NAME	EPSTEIN, SHIRLEY	
STREET ADDRESS	397 SHEFFIELD	
CITY-ST-ZIP	WEST PALM BEACH FL	
TITLE	VD	<input type="checkbox"/> DELETE
NAME	EPSTEIN, NOAH	
STREET ADDRESS	397 SHEFFIELD Q - CV	
CITY-ST-ZIP	W PALM BCH FL	
TITLE	S	<input type="checkbox"/> DELETE
NAME	GROSS, FLORA	
STREET ADDRESS	402 SHEFFIELD Q	
CITY-ST-ZIP	WEST PALM BEACH FL	
TITLE	D	<input checked="" type="checkbox"/> DELETE
NAME	KANE, PHYLLIS	
STREET ADDRESS	402 SHEFFIELD Q	
CITY-ST-ZIP	WEST PALM BEACH FL	
TITLE	D Weitzman	<input type="checkbox"/> DELETE
NAME	WEITZMAN, GEORGE	
STREET ADDRESS	207 SHEFFIELD Q	
CITY-ST-ZIP	WEST PALM BEACH FL	
TITLE	D	<input type="checkbox"/> DELETE
NAME	Joan Van Allen	
STREET ADDRESS	398 Sheffield Q W.P.B.F.I.	
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE		<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
1.2 NAME	Ann Fisher	
1.3 STREET ADDRESS	413 Sheffield Q	
1.4 CITY-ST-ZIP	W.P.B., FL.	
2.1 TITLE	Treas	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
2.2 NAME	Shirley Epstein	
2.3 STREET ADDRESS	397 Sheffield Q	
2.4 CITY-ST-ZIP	W.P.B.F.I.	
3.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME		
3.3 STREET ADDRESS		
3.4 CITY-ST-ZIP		
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	600002477796	
5.3 STREET ADDRESS	-04/03/98--01015--020	
5.4 CITY-ST-ZIP	***183.75	
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)(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.

SIGNATURE: *Shirley Epstein* *Joan Van Allen*

CR2E037 (10/97)