

FILE NOW: FILING FEE IS \$61.25

NONPROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # N45204 (7)

1. Corporation Name

W.P.B. BERKSHIRE A CONDO ASS'N INC.

Principal Place of Business

Mailing Address

18 BERKSHIRE A
WEST PALM BEACH FL 33417

18 BERKSHIRE A
WEST PALM BEACH FL 33417



2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip Country

28 Zip Country

24

29 30

3. Date Incorporated or Qualified
09/19/1991

3a. Date of Last Report
04/26/1995

4. FEI Number

65-0333728

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

☐

\$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes

☐

Yes

☐

No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

WEINBERG, SIDNEY
18 BERKSHIRE A
WEST PALM BEACH FL 33417

81 Name

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

83

84 City

FL

85

Zip Code

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
NAME GOODMAN, JESSE
STREET ADDRESS 17 BERKSHIRE A
CITY-ST-ZIP W PALM BCH FL

☐ DELETE

TITLE V
NAME SHAPIRO, MAX
STREET ADDRESS 10 BERKSHIRE A
CITY-ST-ZIP W PALM BCH FL

☐ DELETE

TITLE S
NAME SANFORD, EMILY
STREET ADDRESS 4 BERKSHIRE A
CITY-ST-ZIP W PALM BCH FL

☐ DELETE

TITLE TD
NAME WEINBERG, SIDNEY
STREET ADDRESS 18 BERKSHIRE A
CITY-ST-ZIP W PALM BCH FL

☐ DELETE

TITLE D
NAME QUINTO, PATRICIA
STREET ADDRESS 1 BERKSHIRE A
CITY-ST-ZIP W PALM BCH FL

☐ DELETE

TITLE D
NAME REDMAN, ANN
STREET ADDRESS 22 BERKSHIRE A
CITY-ST-ZIP W PALM BCH FL

☐ DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

☐ Change ☐ Addition

11 TITLE
12 NAME
13 STREET ADDRESS
14 CITY-ST-ZIP

21 TITLE
22 NAME
23 STREET ADDRESS
24 CITY-ST-ZIP

31 TITLE
32 NAME
33 STREET ADDRESS
34 CITY-ST-ZIP

41 TITLE
42 NAME
43 STREET ADDRESS
44 CITY-ST-ZIP

51 TITLE
52 NAME
53 STREET ADDRESS
54 CITY-ST-ZIP

61 TITLE
62 NAME
63 STREET ADDRESS
64 CITY-ST-ZIP

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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: SIDNEY WEINBERG Sidney Weinberg Jan 4/13/96 (408) 688-6182

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (12/95)