2002 UNIFORM BUSINESS REPORT (UBR) **DOCUMENT # 732487** 1. Entity Name SECRETARY OF STAFE LYNDHURST "N" CONDOMINIUM ASSOCIATION, INC. HVISION OF CORPORATIONS Principal Place of Business Mailing Address 02 APR -3 AM 10: 43 CENTURY VILLAGE E CENTURY VILLAGE E LYNDHURST N 3065 3065 LYNDHURST N DEERFIELD BEACH FL 33442 DEERFIELD BEACH FL 33442 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For 59-1886610 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) CONDOMINIUM OWNERS ORGANIZATION OF CENTURY 3501 WEST DRIVE A Second DEERFIELD BEACH FL 33442-2085 City Zip Code 8. 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 DATE Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) 9. Election Campaign Financing \$5.00 May Be Make Check Payable to FILE NOW: FEE IS \$61.25 Trust Fund Contribution. П Added to Fees Department of State 10. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 11. TITLE ۷Þ Delete TITLE ☐ Change D NAME HOLTZMAN/JUEROME SZ NAME MARTIN SCHWARTZ STREET ADDRESS LYNDHDURST:N 3063 STREET ADDRESS LYNDHURST N 4068 CITY-ST-ZIP CITY-ST-7IP

☐ Addition DEERFIELD BEACH FL 33442 DEERFIELD BEACH FL 33442 100005257901-TITLE ☐ Delete TITLE FERRERO,; EUGENE: NAME NAME -04/12/02--01058--001 STREET ADDRESS STREET ADDRESS LYNDHURST N 3065 **15067.50 *****61.25 CITY-ST-ZIP CITY-ST-ZIP DEERFIELD BEACH FL 33442 ☐ Delete Change ☐ Addition TITLE TITLE NAME TUCK, SONYA NAME STREET ADDRESS STREET ADDRESS LYNDHURST N 4062 CITY-ST-ZIP CITY-ST-ZIP DEERFIELD BEACH FL 33442 TITLE ☐ Delete TITLE Change ☐ Addition NAME ZUCKER, HENRY NAME STREET ADDRESS LYNDHURST N 4058 STREET ADDRESS CITY-ST-ZIP DEERFIELD BEACH FL 33442 CITY-ST-ZIP Delete ☐ Addition TITLE TITLE WALDMAN, NORMAN NAME NAME STREET ADDRESS LYNDHDURST N 4057 STREET ADDRESS CITY-ST-7IP CITY-ST-7IP DEERFIELD BEACH FL 33442 TITLE ☐ Delete TITLE Addition NAME BELL, RHODA NAME STREET ADDRESS STREET ADDRESS LYNDHURST N 3068

12. 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 report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all paper like empowered.

CITY-ST-ZIP

SIGNATURE

DEERFIELD BEACH FL 33442

CITY-ST-7IP

SIGNATURE AND TYPED ON PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

EXRERO 1/14/08 42

421-3906

CRZ

(9/01