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 # 733601

1. Corporation Name

CONTINENTAL VILLAGE CONDOMINIUM ASSOCIATIONING.

Principal Place of Bus								
1402	N.W.	80TH	AVE.					
	ATE.	E1 00	^^^					

Mailing Address

1402 N.W. 80TH AVE. MARGATE FL 33063

FILED Mar 02, 1999 8:00 am § Secretary of State

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M	ANGELE PL 33003		IW.	andare re socio			
2. 21	Principal Place of Busin	ness	2a.	Mailing Address			3. Date incorporated or Qualifed 08/15/1975
22	Suite, Apt. #, etc.		- 27	Suite, Apt. #, etc.			4. FEI Number Applied For 59-1605902 Not Applied ble
23	City & State		28	City & State			5. Certificate of Status Desired \$8.75 Additional Fee Required
24	Zip	Country 25	29	Zip	Country	,	6. Election Campaign Financing Trust Fund Contribution \$5.00 May Be Added to Fees
9. Name and Address of Current Registered Agent			10. Name and Address of New Registered Agent				
					81	١	Name
BECKER, POLIAKOFF P.A. 3111 STIRLING RD.		82	82 Street Address (P.O. Box Number is Not Acceptable)				
	FT. LAUDERDALE FL	. 33312-3525			83		
					84		FL
1	office or registered ag	sions of Sections 617.0 ent, or both, in the Sta ith, and accept the obli	te of Flori	da. Such change wa	s authorized by	the	re-named corporation submits this statement for the purpose of changing its registered the corporation's board of directors. I hereby accept the appointment as registered s.

SIGNATURE Signature, typed or printed name of registered agent and title if applica (NOTE: Registered Agent signature required when reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 OFFICERS AND DIRECTORS 12. 13. Change ☐ DELETE 1.1 TITLE TITLE COHEN, RUBEN COHEN, RUBEN 1.2 NAME NAME 1402 NW 80th Ave #408 1402 NE 80TH AVE #408 1.3 STREET ADDRESS STREET ADDRESS MARGATE. FL. 33063
VPD
ILLINGWORTH, JOHN 1.4 CITY-ST-ZIP MARGATE, FL 00000 CITY-ST-ZIP **X** Addition DELETE ☐ Change 2.1 TITLE TITLE WEINER, MURRAY 2.2 NAME NAME 1402 NW 80TH AVE., APT. 504 2.3 STREET ADDRESS 1402 NW 80th Ave., STREET ADDRESS MARGATE FL . 33063 2.4 CITY-ST-ZIP MARGATE, FL. 33063 CITY-ST-ZIP ☐ Change Addition ☐ DELETE 3.1 TITLE TITLE LICHTENSTEIN, LOUIS 32 NAME NAME 1402 NW 80TH AVE 3.3 STREET ADDRESS STREET ADDRESS MARGATE FL 33063 3.4. CITY-ST-ZIP CITY-ST-ZIP DELETE ☐ Change **M**ddition 41 TITLE D TITLE 4. 2 NAME KEENEY, GEORGE **BLOOM, MILTON** NAME 1402 NW 80TH AVE 405 4.3 STREET ADDRESS 1402 NW 80th Ave., # 512 STREET ADDRES MARGATE, FL 00000 MARGATE, FL. 33063 4.4 CITY-ST-ZIP CITY-ST-ZIP Addition DELETE 5.1 TITLE TITLE 5.2 NAME ZEISLER, CHARLOTTE NAME GILLMAN, EDWARD 5.3 STREET ADDRESS 1402 NW 80TH AVE STREET ADDRES 1402 NW 80th Ave., # 410 5.4 CITY-ST-ZIP MARGATE FL CITY-ST-ZIP MARGATE, FL. 33063 XDELETE ☐ Addition 6.1 TITLE Change TITLE 6.2 NAME NAME KIBEL, FREDA FEINGOLD, CARL 6.3 STREET ADDRESS 1402 NW 80TH AVE 109 STREET ADDRESS 1102 NW 80th Ave.

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 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2/4/99

954-973-0223

Daytime Phone #

CR2E037 (11/98)