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NONPROFIT CORPORATION ANNUAL REPORT

1998



Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #

(6)

CENCLUB HOMEOWNERS ASSOCIATION, INC.

FILED

Apr 29 1998 8:00am

Secretary of State

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Principal Place of Business Mailing Address						- I CODIN FORM LITTURE SINCE STORE BEAUTIFUL BROWN BIRTH BROWN BIRTH BROWN FIRM BOOK				
100 CENTURY		100 CENTURY BOULEVARD					3. Date Incorporated or Qualified			
W. PALM BEAC	2H FL 33417	W. P	ALM BEACH FL 3341	7			03/18/1976			
							4. FEI Number Applied For			
			. 7.5				65-0123144 Not Applicable			
⊢				Mailing Address			5. Certificate of Status Desired \$8.75 Additional			
21 Suite, Apt.	#. etc.	28	Suite, Apt. #, etc.				Fee Required			
22		27	27				6. Election Campaign Financing \$5,00 May Be Trust Fund Contribution Added to Fees			
City & Stat	0	<u> </u>	City & State				7. Is this nonprofit corporation a homeowners association?			
Zip Country			Zip Country		,	8. This corporation owes or has paid the current year Intangible				
24	25	29		30			Personal Property Tax due June 30. Yes X No			
	9. Name and Address of Curre	nt Registe	red Agent				10. Name and Address of New Registered Agent			
ĺ					81	Name				
LEVY,MARK F. CENTURY VILLAGE ADMIN. BLDG.				62	Street	dress (P.O. Box Number is Not Acceptable)				
	ITURY BLVD.				83					
W. PALA	A BEACH FL 33417				84	City	■■ 85 Zip Code			
11. Pursuant	to the provisions of Sections 617.05	02 and 617	.1508, Florida Statu	tes, the at	XXV€	e-named	Corporation submits this statement for the purpose of changing its registered			
office or r agent. I a	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 .										
12,	OFFICERS AN	ID DIRECT	ORS	13.			ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12			
TMLE	PTD		DELETE	1.1 TO	LLE		PTD Change Addition			
NAME	SIEGALL, SONDRA			1.2 N	ME	ĺ	SPEIR, KAREN			
STREET ADDRESS	100 CENTURY BLVD.			1.3 ST	REET	ADORESS	100 Century Blud.			
CITY-ST-ZIP	W. PALM BCH FL 33417		I I priete	1.4 CF		T-ZIP	W. Palm BchiFL. 33417			
TITLE	VSD COUZ DANIEL		☐ DELETE	2.1 TI			☐ Change ☐ Addition			
NAME	CRUZ, DANIEL			2.2 NA		i				
STREET ADDRESS	100 CENTURY BLVD.					ADDRESS				
CITY-ST-ZIP TITLE	W. PALM BCH. FL 33417 D		☐ DELETE	2. 4 CI 3.1 TIT		ST-21P	Change I Little			
NAME	LEVY. MARK		C Detect	3.1 MA	• •		L. Change L Addition			
STREET ADDRESS	100 CENTURY BLVD.				_	ADDRESS				
CITY-ST-ZIP	WEST BALLS BEAGLES			3.4. Ci						
TITLE			4.1 TIT		11-EIF	☐ Change ☐ Addition				
NAME				4.2 N						
STREET ADDRESS						ADDRESS				
CITY-ST-ZIP				4.4 CR						
TITLE			DELETE	5.1 TIT		1	☐ Change ☐ Addition			
NAME				5.2 NA	ME	- 1				
STREET ADDRESS				5.3 \$T	REET	ADDRESS	!			
CITY-ST-ZIP				5.4 CIT	Y-\$1	T-ZIP				
TITLE			DELETE	6.1 TIT	LE		Change Addition			
NAME				62 NA	ME					
STREET ADDRESS				6.3 ST	REET /	ADDRESS				
CITY-ST-ZIP		'AL AL . AU		6.4 CIT	Y-ST	r-zip				
indicated	erary that the information supplied w on this annual report or supplements	rith this filin al annual re	g does not qualify for	or the execurate and	mpti tha	tion stated at my sign	d in Section 119.07(3)(i), Florida Statutes. I further certify that the information lature 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.