2003 NOT-FOR-PROFIT CORPORATION **UNIFORM BUSINESS REPORT (UBR)**

04-18-2003 90478 001 14,700.00 736688

DOCUMENT # 736688

1. Entity Name							03 APR 28 API 3: 35					
FARNHAM "N" CONDOMINIUM ASSOCIATION, INC.												
PARINTAL	M "N" GOI	ADOCCH MOINIMINOON	SEEMETARY OF STATE TALLAHASSEE, FLORIDA									
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Principal Pla	ce of Busines	s	Mailing Address	•								
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		OF CENTL	INV VILLAGE E. INC	: EC	OCVE		((88) ((88) (
2. Principal!	Place of Busin	ness	3. Massa Addies Drive	۱ ,				IRIO DIAM DAMI INDI	. [[]] []] []] []] []]		311 DJU 1301	
			eerlight Beh., FL 3344	2-2085								
Suite, Apt	. #, etc.		Suite, Apt. #, etc.	1		- 1		CHECK HERE I	F MAKING CH	ANGES		
City & State			City & State			4 55(3) 25 50 500					7	
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Zip Country			Zip	Co	Country				¢0			4
Zip Country		Codinary	2.5		1		5. Certificate of Status Desired S8.75 Additional Fee Required				J	
	6. Name	and Address of Current F	Registered Agent		7. Name and Address of New Registered Agent							4
					Name				<u></u>			7
CONDOMINIUM OWNERS ORGANIZATION OF CENTURY							 	 .				1
VILLAGE EAST INC.					Street /	Address (P	O, Box Number is I	Not Acceptable)				ł
3501 WEST DRIVE												7
	ELD BEACH										4	
04,614				i	City	City FL Zip Co					e	1
8. The above	e named entit	submits this statement for	the purpose of changing its	s register	ed office o	r registere	d agent, or both, in	the State of Flor	ida. I am tamil	ar with,	and accept	7
the obliga	tions of regist	ered agent.										Ì
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SIGNATURE				<u> </u>			 					-
	Signatura, typed	or printed name of registered eigent or	nd title flappicable. (NO)	t: Registere	o Agent signa	iture required v	when reinstating)		DATE			_}
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	FILE NOW	: FEE IS \$61.25	9. Election Ca				\$5.00 May Be		e Check Pa			1
			Trust Fund (Johnnout	ion.	Ц,	Added to Fees	Florid	a Departme	nt of a	state	1
10.		OFFICERS AND DIRE	ECTORS	11.		AI	DDITIONS/CHANGI	ES TO OFFICER	S AND DIRECT	OBS IN	10	\dashv
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TITLE	VD		Delete	TITLE						Change	Addition	18
NAME	SHULDINI	er, Bernard		NAM	Ε .	l						1
STREET ADDRESS	3001 FAR	NHAM N		STRE	et address		•					ĺ
CITY-ST-ZIP	DEERFIEL	D BEACH FL 33442		CITY	-ST-ZiP	[Λ					1
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NAME	BURNIKE	., ELAINE		NAM		1 1	ALI INI.N	J		-		1
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NAME	DRANON,			NAMI		1011	6 FARI	N/HM]
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NAME	WEITZNER			NAME								
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UITTOITAL) Beach Fl 33442 _		PILT.	31-51	, ,		- · ·	-		-	Ţ

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 a chapter its empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if SIGNATURE:

SIGNATURE:

BEACH OF THE STATUTE OF THE STAT

Daytime Phone #