## **2001 UNIFORM BUSINESS REPORT (UBR)**

SIGNATURE/LA

## May 01, 2001 8:00 am Secretary of State DOCUMENT # 737631 1. Entity Name FARNHAM "Q" CONDOMINIUM ASSOCIATION, INC. 04-14-2001 90045 001 15 067 50 Principal Place of Business Mailing Address FARNHAM Q #344 CVE FARNHAM Q #344 CVE DEERFIELD BEACH FL 33442-2984 DEERFIELD BEACH FL 33442-2984 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State Applied For City & State 4. FEI Number 59-1921801 Not Applicable Zip Country Country Zip \$8.75 Additional 5. Certificate of Status Desired 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Street Address (P.O. Box Number is Not Acceptable) CONDOMINIUM OWNERS ORGANIZATION OF CENTURY VILLAGE E.,INC. 3501 WEST DRIVE City Zip Code DEERFIELD BEACH FL 33442-2085 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 Make Check Payable to FILE NOW: \$5.00 May Be Trust Fund Contribution. Added to Fees Department of State FEE IS \$61.25 ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 OFFICERS AND DIRECTORS 10. 11. **Addition** ☐ Change Delete TITLE TITLE RICHARD CONKLIN 359 FARNHAM Q NAME NAME SHEBROE, LARRY STREET ADDRESS STREET ADDRESS 344 FARNHAM Q DEERFIELD BEACH, FL. 33442 CITY-ST-ZIP CITY-ST-ZIP **DEERFIELD BEACH FL 33442** ☐ Change Addition 1 TITLE Delete TITLE STEVEN SCHWARTZ NAME NAME ALFANO, TERESA 343 FARNHAM Q STREET ADDRESS STREET ADDRESS 355 FARNHAM Q FL.33442 DEERFIELD BEACH. CITY-ST-ZIP CITY-ST-ZIP DEERFIELD BEACH FL 33442 Delete ☐ Change ☐ Addition TITLE TITLE NAME SHEBROE, ROCHELLE M NAME STREET ADDRESS STREET ADDRESS 344 FARNHAM Q CITY-ST-ZIP CITY-ST-ZIP DEERFIELD BEACH FL 33442 ☐ Change Addition TITLE TD ☐ Deleta TITLE NAME NAME COGAN, GLORIA STREET ADDRESS STREET ADDRESS 340 FARNHAM Q CITY-ST-ZIP CITY-ST-ZIP DEERFIELD BEACH FL 33442 Addition TITLE VD ☐ Delete TITLE ☐ Change KREIGRER, MIRIAM NAME NAME STREET ADDRESS STREET ADDRESS 360 FARNHAM Q CITY-ST-ZIP CITY-ST-ZIP DEERFIELD BEACH FL 33442 Change ☐ Addition TITLE Delete TITLE LATTANZIO, VITO W NAME STREET ADDRESS STREET ADDRESS 358 FARNHAM Q CITY-ST-Z#P CITY-ST-ZIP DEERFIELD BEACH FL 33442 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 attached in with an address with all other like empowered.

FILED