

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

FILED

02 APR 29 AM 10:52

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **737631**
1. Entity Name
FARNHAM Q CONDOMINIUM ASS. INC.

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business
FARNHAM Q 344
Suite, Apt. #, etc.

3. Mailing Address
FARNHAM Q 344
Suite, Apt. #, etc.

City & State
DEERFIELD BEACH FL.

City & State
DEERFIELD BEACH FL.

Zip
33442

Country

Zip
33442

Country

DO NOT WRITE IN THIS SPACE

4. FEI Number
59-1921801

Applied For
 Not Applicable

5. Certificate of Status Desired **\$8.75** Additional Fee Required

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7. Name and Address of Current Registered Agent

Name
CONDOMINIUM OWNERS ORGANIZATION OF CENTURY VILLAGE E, INC.

Street Address (P.O. Box Number is Not Acceptable)
3501 WEST DRIVE

City
DEERFIELD BEACH

FL Zip Code
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 _____ (NOTE: Registered Agent signature required when reinstating)

Signature, typed or printed name of registered agent and title if applicable. DATE

FEE IS \$61.25 Initial or Amended UBR

9. Election Campaign Financing Trust Fund Contribution. **\$5.00** May Be Added to Fees

Make Check Payable to Department of State

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PSHEBRDE, LARRY 344 FARNHAM Q DEERFIELD BEACH FL. 33442
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DALFANO, TERESA 355 FARNHAM Q DEERFIELD BEACH FL. 33442
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD POLLACK, KILEEN 351 FARNHAM Q DEERFIELD BEACH FL. 33442
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD COGAN, GLORIA 340 FARNHAM Q DEERFIELD BEACH FL. 33442
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD KRIEGER, MIRIAM 360 FARNHAM Q DEERFIELD BEACH FL 33442
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D CONKLIN, RICHARD 359 FARNHAM Q DEERFIELD BEACH FL. 33442

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Handwritten signature/initials

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 on an attachment with an address, with all other like empowered.

SIGNATURE: **Larry A Shebrde LARRY SHEBRDE Feb 21, 2002 42F. 0537**

CR2E037B (12/01)