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AND  
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**97 APR 29 PM 1:00**

**SECRETARY OF STATE  
TALLAHASSEE, FLORIDA**



**NONPROFIT  
CORPORATION  
ANNUAL REPORT  
1997**

FLORIDA DEPARTMENT OF STATE  
**Sandra B. Mortham**  
Secretary of State  
DIVISION OF CORPORATIONS

**DOCUMENT # 737636 (1)**  
1. Corporation Name  
**RICHMOND "E" CONDOMINIUM ASSOCIATION, INC.**



Principal Place of Business Mailing Address  
**RICHMOND E-430 DEERFIELD BEACH FL 33442** **RICHMOND E-430 DEERFIELD BEACH FL 33442-2995**

3. Date Incorporated or Qualified **12/23/1976** 3a. Date of Last Report **04/27/1996**  
4. FEI Number **59-1900352** Applied For  Not Applicable   
5. Certificate of Status Desired  **\$8.75 Additional Fee Required**  
6. Election Campaign Financing Trust Fund Contribution  **\$5.00 May Be Added to Fees**  
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes  Yes  No

2. Principal Place of Business 2a. Mailing Address  
21 Suite, Apt. #, etc. 26 Suite, Apt. #, etc.  
22 City & State 27 City & State  
23 Zip Country 28 Zip Country  
24 25 29 30

**9. Name and Address of Current Registered Agent**

**10. Name and Address of New Registered Agent**

**CONDO OWNERS ORG OF CENTURY VILLAGE EAST  
3501 WEST DRIVE  
DEERFIELD BEACH FL 33442-2085**

81 Name  
82 Street Address (P.O. Box Number Is Not Acceptable)  
83  
84 City **FL** 85 Zip Code

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

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

(NOTE: Registered Agent signature required when reinstating)

DATE

**12. OFFICERS AND DIRECTORS**

TITLE	VD	<input type="checkbox"/> DELETE
NAME	ABRAMOWITZ, IRVING	
STREET ADDRESS	RICHMOND E 429	
CITY-ST-ZIP	DEERFIELD BEACH FL	
TITLE	VD	<input type="checkbox"/> DELETE
NAME	ABERBACH, LOU	
STREET ADDRESS	RICHMOND E 240	
CITY-ST-ZIP	DEERFIELD BCH, FL 00000	
TITLE	TD	<input checked="" type="checkbox"/> DELETE
NAME	GROSS, SOLOMON	
STREET ADDRESS	RICHMOND E 250	
CITY-ST-ZIP	DEERFIELD BCH FL	
TITLE	VD	<input checked="" type="checkbox"/> DELETE
NAME	GOLDBERG, RUTH	
STREET ADDRESS	RICHMOND E 132	
CITY-ST-ZIP	DEERFIELD BCH, FL 00000	
TITLE	PD	<input type="checkbox"/> DELETE
NAME	BERGER, CECILE	
STREET ADDRESS	RICHMOND E 430	
CITY-ST-ZIP	DEERFIELD BCH FL	
TITLE	8VD 5	<input type="checkbox"/> DELETE
NAME	BRENNAN, LOIS	
STREET ADDRESS	RICHMOND E 336	
CITY-ST-ZIP	DEERFIELD BEACH FL	

**13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12**

1.1 TITLE **600002159108-08**  
1.2 NAME **-04/29/97--01109--001**  
1.3 STREET ADDRESS **\*\*15190.00 \*\*\*\*\*61.25**  
1.4 CITY-ST-ZIP

2.1 TITLE  Change  Addition  
2.2 NAME  
2.3 STREET ADDRESS  
2.4 CITY-ST-ZIP

3.1 TITLE  Change  Addition  
3.2 NAME **TD PHILLIP, JOHN DAYL**  
3.3 STREET ADDRESS **334 RICHMOND E**  
3.4 CITY-ST-ZIP

4.1 TITLE  Change  Addition  
4.2 NAME **VD FINKELSTEIN, FRAN**  
4.3 STREET ADDRESS **RICHMOND E 387**  
4.4 CITY-ST-ZIP

5.1 TITLE  Change  Addition  
5.2 NAME  
5.3 STREET ADDRESS  
5.4 CITY-ST-ZIP

6.1 TITLE  Change  Addition  
6.2 NAME **VD 5 BRENNAN, LOIS**  
6.3 STREET ADDRESS  
6.4 CITY-ST-ZIP

14. I do 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: **CECILE BERGER** **CECILE BERGER** **1/6/97 954-426-2885**  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone # **0042853**

CR2E037 (9/96)