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95 MAY -1 PM12:16

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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32760.00 **130.00

DO NOT WRITE IN THIS SPACE

**CORPORATION
ANNUAL REPORT
1995**

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

DOCUMENT # 740423
1. Corporation Name
TILFORD "E" CONDOMINIUM ASS'N, INC

Principal Place of Business Mailing Address
TILFORD E CONDO ASS'N INC. DEERFIELD BEACH FL 33442

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

3. Date Incorporated or Qualified	3a. Date of Last Report
10/14/1977	3/8/94
4. FBI Number	Applied For
59-1899539	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
7. Nonprofit with IRS 501(c)(3) Tax Exempt Status	\$68.75 Supplemental Fee Not Required
8. This corporation has liability for intangible tax under § 199.032 Florida Statutes	Yes No

9. Name and Address of Current Registered Agent
CONDOMINIUM OWNERS ORGANIZATION OF CENTURY VILLAGE EAST 3501 WEST DRIVE DEERFIELD BEACH FL 33442

10. Name and Address of New Registered Agent
81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City
85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, 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 607.0505, 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	P/D
NAME	LEVINE EVELYN
STREET ADDRESS	TILFORD E 103
CITY - ST - ZIP	DEERFIELD BEACH, FL 33442
TITLE	D
NAME	SCHWARTZ, SOL
STREET ADDRESS	TILFORD E 94
CITY - ST - ZIP	DEERFIELD BEACH, FL 33442
TITLE	T/S
NAME	SCHWARTZ SYLVIA
STREET ADDRESS	TILFORD E 94
CITY - ST - ZIP	DEERFIELD BEACH, FL 33442
TITLE	V/D
NAME	WEINER, RUTH
STREET ADDRESS	TILFORD E 102
CITY - ST - ZIP	DEERFIELD BEACH, FL 33442
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
11 TITLE	Change Addition
12 NAME	
13 STREET ADDRESS	
14 CITY - ST - ZIP	Change Addition
21 TITLE	
22 NAME	
23 STREET ADDRESS	
24 CITY - ST - ZIP	Change Addition
31 TITLE	
32 NAME	
33 STREET ADDRESS	
34 CITY - ST - ZIP	Change Addition
41 TITLE	
42 NAME	
43 STREET ADDRESS	
44 CITY - ST - ZIP	Change Addition
51 TITLE	
52 NAME	
53 STREET ADDRESS	
54 CITY - ST - ZIP	Change Addition
61 TITLE	
62 NAME	
63 STREET ADDRESS	
64 CITY - ST - ZIP	Change Addition

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 110.07(3)(b), 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: **Evelyn Levine** FEB 27 1995 305-421-3519
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone