FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 1. Corporation Name

740423

(9)

TILFORD "E" CONDOMINIUM ASSOCIATION, INC.

FILED Mar 31 1998 8:00am Secretary of State

Principal Place of Business				Mailing Address						Oldii Didii Bidii	OFOER VINNE PACE	
TILFORD E 103				TILFORD E 103					3. Date Incorporated or Qualified		······································	
CENTURY VILLAGE EAST DEERFIELD BEACH FL 33442				CENTURY VILLAGE EAST DEERFIELD BEACH FL 33442					10/14/1977			
DEEM IEEE OC	101116 0011		UL	DENOTITE O	U112				4. FEI Number	1	pplied For	
A DI LINE AND									59-1899539		ot Applicable	
2. Principal Place of Business				2a. Mailing Address					5. Certificate of Status Desired		Additional	
Suite, Apt. #, etc.				Suite, Apt. #, etc.					6. Election Campaign Financing		Required May Be	
22				27					Trust Fund Contribution		to Fees	
City & State				City & State					7. Is this nonprofit corporation a homeowe		on?	
23	3			28					☐ Yes ☐ No			
Zip	Country			Zip Country			<i>y</i>		8. This corporation owes or has paid the			
24 25 9. Name and Address of Current R				29 30 30 30 30 30 30 30 30 30 30 30 30 30					Personal Property Tax due June 30. Yes No 10. Name and Address of New Registered Agent			
	4. 1.					81						
CONDOMINIUM OWNERS ORGANIZATION				OF CENTURY					(D.O. Doublinshools Not Association			
VILLAGE EAST				CENTURY			Str	eet Aaare	ess (P.O. Box Number is Not Acceptable)			
	EST DRIVE					83				-		
DEERFIELD BEACH FL 33442-2085							Cit	····		. 85 Zip	Code	
									F			
 Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the office or registered agent, or both, in the State of Florida. Such change was authoragent. I am familiar with, and accept the obligations of, Section 617.0503, Florida 							e-nar y the	ned corpo corporatio	oration submits this statement for the purpose on's board of directors. I hereby accept the a	of changing ppointment a	its registered s registered	
•	iris i a irmilai wi	in, and accept the obli	gations of	, 3900071 017.0303, 1	FIORUA SIA	wies	5.					
SIGNATURE Signature, typed or printed name of registered agent and little # applicable. (NOTE: Registered agent)							ent sign	ature require	d when reinstating) DATE			
12.	-	OFFICERS A	ND DIREC		13.			·····	ADDITIONS/CHANGES TO OFFICERS A			
TITLE	PD	PUPINN		☐ DELETE	1.1 T					☐ Change	Addition	
NAME		EVELYN			1.2 N							
STREET ADDRESS	TILFORE						ADDR	ess				
CITY-ST-ZIP TITLE	DEERFIELD BEACH FL DTS					1.4 CITY-ST-ZIP 2.1 TITLE				Change	Addition	
NAME	ADLER,	HARRY		<u> </u>	2.2 N							
STREET ADDRESS	TILFORD						r addr	ess				
CITY-ST-ZIP		LD BEACH FL					ST-ZIP					
TITLE	VD			DELETE	3.1 T					☐ Change	Addition	
NAME	WEINER	, ruth			3.2 N	AME						
STREET ADDRESS	TILFORD				3.3 \$	TREET	ADDR	ESS				
CITY-ST-ZIP	DEERFIE	LD BCH FL			3.4. (:ITY-5	ST-ZIP					
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NAME					4.21	IAME						
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NAME					5.2 N				-04/01/9801022	010		
STREET ADDRESS							ADDRI	ess	***15086.25			
CITY-ST-ZIP				☐ DELETE			T-ZIP			Change	Addition	
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STREET ADDRESS							r addri St-Zip				PE 3.3/	
CITY-ST-ZIP					2096	ر- ر _{ال}	71 - EIF				- 1	

14. 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 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.

CHATHER & ALL YMAN STERIES WALLEVINE BLANCE HALLY

:R2E037 (10/97)