FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

1997

DOCUMENT # 74082

(2)

VENTNOR "A" CONDOMINIUM ASSOCIATION, INC.

Principal Place of Business Mailing Address

APPROVED AND FILED

97 APR 28 AM 11: 50

SECRETARY OF STATE TALLAHASSEE. FLORIDA



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VENTNOR P-4072 DEERFIELD BEACH FL 33442		ROSELLA BALLIN A-06 VENTNOR DEERFIELD BEACH FL 33442-2422			
				3. Date Incorporated or Qualified 11/18/1977	3a. Date of Last Report 01/31/1996
Principal Place of Business 2a. Mailing Address			· · · · · · · · · · · · · · · · · · ·	4. FEI Number 59-1922114	Applied For
21 40 K	OSELLA BALLIN	26		39 1822 1 14	Not Applicable
Suite, Apt. 22 VEN7		Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & State	9	City & State		6. Election Campaign Financing	\$5.00 May Be
23 DEER	FIELD BEACH, FL.	28		Trust Fund Contribution	Added to Fees
Zip	2-242225 BROWARD	Zip 29	Country 30	8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes	
	9. Name and Address of Current	t Registered Agent		10. Name and Address of New Re	gistered Agent
		1-	81 Name		
CONDOMINIUM ORGANIZATION OF CENTURY			82 Street A	82 Street Address (P.O. Box Number is Not Acceptable)	
VILLAGE EAST,INC. 3501 WEST DRIVE			83		
DEERFIELD BEACH FL 33442-2085					
DLLTH IL	ED BENOTITE GOTTE-2000		84 City		FL 85 Zip Code
11, Pursuant I	to the provisions of Sections 617.0502	2 and 617.1508, Florida Statut	es, the above-named	corporation submits this statement for the p	
office or re	egistered agent, or both, in the State on familiar with, and accept the obliga	of Florida. Such change was a stigns of, Section 617,0503. Fi	authorized by the corp orida Statutes.	corporation submits this statement for the p poration's board of directors. I hereby accep	t the appointment as registered
SIGNATURE				•	
SIGNATURE_	Signature, typed or printed name of registered ager	nt and tille if applicable. (NOT	E Registered Agent signature	required when reinstating)	DATE
12.	OFFICERS AND		13.	ADDITIONS/CHANGES TO OFFIC	
TITLE	DP	DELETE	1.1 TITLE	PO SUCIVAL	Change Addition
NAME	STRANSKY, MARTIN		1.2 NAME	RABEN, EVELYN	3
STREET ADDRESS	A-09 VENTNOR		1.3 STREET ADDRESS	VENTNOR H. /	[8
CITY-ST-ZIP	DEERFIELD BEACH FL		1.4 CITY-ST-ZIP	DEGRETIBLD BENCH, FL	33442
TITLE	DV	☐ DELETE	2.1 TITLE		Change
NAME	rowland, selma		2.2 NAME		
STREET ADDRESS	A-02 VENTNOR		2.3 STREET ADORESS		
CITY - ST - ZIP	DEERFIELD BEACH FL		2. 4 CITY - \$1 - ZIP		<u>'</u>
TITLE	S	DELETE	3.1 TITLE		Change Addition
NAME	Bronstein, Rose		3.2 NAME	8000051	594884 9701109001
STREET ADDRESS	F-190 GRANTHAM		3.3 STREET ADDRESS	-04/29/	9701109001
CHY-ST-ZIP	DEERFIELD BEACH FL		3.4. CITY-ST-ZIP	**1519	U.UU *****51.25
TITLE	Ť	☐ DELETE	4.1 TITLE	TO	Charige Addition
NAME	BALLIN, ROSELLA		4. 2 NAME		
STREET ADDRESS	A-08 VENTNOR		4.3 STREET ADDRESS	:	
CITY-ST-ZIP	DEERFIELD BCH, FL 0		4.4 CITY - ST - ZIP		
TITLE		☐ DELETE	5.1 YITLE		Change Addition
NAME			5.2 NAME	. 01	
STREET ADDRESS			5.3 STREET ADDRESS	4 11/20	
CITY-ST-2IP			5.4 CITY - ST - ZIP	Majos	
TITLE		DELETE	6.1 TITLE	y	Change Addition
NAME			6.2 NAME		
STREET ADDRESS			6.3 STREET ADDRESS		
			4.4 4 10 by (E44)		
CITY-ST-ZIP			6.4 CITY - ST - ZIP		

. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(1), Florida Statutes. I further certify that the information indicated on this annual opport 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 corpiration or the receiver or trustee impowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears in Block 12 or Block 13 it changed, or on an attachment with an address.

SIGNATUR

TURE AND ZPOED OR PRINTED HAVE OF ANY THING SHYDER OR DIRECTION Date

CR2E037 (9/96)