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Jan 15 1997 8:00am
Secretary of State

NONPROFIT
CORPORATION
ANNUAL REPORT
1997



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

DOCUMENT # 742731 (3)

1. Corporation Name

CENTURY VILLAGE BERKSHIRE C CONDOMINIM ASSOCIATI
ON, INC.



Principal Place of Business

Mailing Address

BERKSHIRE C53
W PALM BCH FL 33417
US

BERKSHIRE C53
W PALM BCH FL 33417
US

3. Date Incorporated or Qualified
05/08/1978

3a. Date of Last Report
04/24/1996

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

23 City & State

27 City & State

24 Zip

25 Country

29 Zip

30 Country

4. FEI Number
59-1634801

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

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

~~RICHSTEIN, JACK A.~~
~~BERKSHIRE C53~~ BERKSHIRE C53
W PALM BCH FL 33417

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

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE PD ☐ DELETE
NAME RICHSTEIN, JACK A
STREET ADDRESS BERKSHIRE C53
CITY-ST-ZIP W PALM BCH, FL 00000

1.1 TITLE ☐ Change ☐ Addition
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP

TITLE D ☐ DELETE
NAME CHAPMAN, HAROLD
STREET ADDRESS BERKSHIRE, C72
CITY-ST-ZIP WEST PALM BEACH, FLO

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

TITLE SD ☒ DELETE
NAME BLUM, EVELYN
STREET ADDRESS BERKSHIRE C #68
CITY-ST-ZIP WEST PALM BEACH, FLO

3.1 TITLE SD ☒ Change ☐ Addition
3.2 NAME FRIEDMAN, GERTRUDE V.
3.3 STREET ADDRESS BERKSHIRE C61
3.4 CITY-ST-ZIP W. P. B. FL 00000

TITLE T ☒ DELETE
NAME FRIEDMAN, GERTRUDE
STREET ADDRESS BERKSHIRE C81
CITY-ST-ZIP W PALM BCH, FL 00000

4.1 TITLE T ☐ Change ☒ Addition
4.2 NAME RUTH HAUSEN
4.3 STREET ADDRESS BERKSHIRE C63
4.4 CITY-ST-ZIP W. P. B. FL 00000

TITLE V ☐ DELETE
NAME ALTER, ELEANOR
STREET ADDRESS BERKSHIRE C56
CITY-ST-ZIP WEST PALM BEACH, FLO

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

TITLE D ☐ DELETE
NAME BRICKEL, GLORIA
STREET ADDRESS BERKSHIRE C55
CITY-ST-ZIP W PALM BEACH FL

6.1 TITLE ☐ Change ☐ Addition
6.2 NAME
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:

Jack A. Richstein
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

JACK A. RICHSTEIN 1/6/97 561 683-5740
Date Daytime Phone # 0076894

CR2E037 (9/96)