2003 NOT-FOR-PROFIT CORPORATION

UNIFORM BUSINESS REPORT (UBR **DOCUMENT # 742737**



FILED Feb 26, 2003 8:00 am Secretary of State

02-26-2003 90137 032 ****61.25



CENTURY VILLAGE CAMBRIDGE G CONDOMINIUM ASSOCIAT Principal Place of Business Mailing Address 150 CAMGRIDGE "G" 150 CAMBRIDGE "G" WEST PALM BEACH FL 33417 WEST PALM BEACH FL 33417 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. ☐ CHECK HERE IF MAKING CHANGES City & State City & State 4. FEI Number 59-1652138 Applied For Not Applicable Zip Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent PERLMAN, LEONARD Street Address (P.O. Box Number is Not Acceptable) 150 CAMBRIDGE "G" WEST PALM BEACH FL 33417 Zip Code 8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE **FILE NOW: FEE IS \$61.25 9. Election Campaign Financing \$5.00 May Be Make Check Payable to Trust Fund Contribution. ¥ Added to Fees Florida Department of State OFFICERS AND DIRECTORS 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 ☐ Delete TITLE ☐ Addition NAME PERLMAN, LEONARD NAME STREET ADDRESS 150 CAMBRIDGE "G" STREET ADDRESS CITY-ST-ZIP WEST PALM BEACH FL 33417 CITY-ST-ZIP ☐ Delete TITLE ☐ Change ☐ Addition MCCARTER, HERBERT NAME STREET ADDRESS 167 CAMBRIDGE G STREET ADDRESS CITY-ST-ZIP WEST PALM BEACH FL 33417 CITY-ST-ZIP TITLE Delete TITI F NAME SULKES, HYMAN -NAME STREET ADDRESS 157 CAMBRIDGE "G" STREET ADDRESS CITY-ST-ZIP WEST PALM BEACH FL 33417 CITY-ST-ZIP TITLE ☐ Delete Change Addition NAME CARDONICK, EVELYN NAME STREET ADDRESS 170 CAMBRIDGE G STREET ADDRESS CITY-ST-ZIP WEST PALM BEACH FL 33417-3417 CITY-ST-ZIP TITLE Delete TITLE Change NAME ☐ Addition PERLMAN, MYRA NAME STREET ADDRESS CAMBRIDGE G-150 CENT VIL STREET ADDRESS CITY-ST-ZIP WEST PALM BEACH FL CITY-ST-ZIP ☐ Delete TITLE ☐ Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP

I hereby certify that the information supplied with this filling does not qualify for the exemption stated in Section 119.07(3)(i). Florida Statutes. I further certify that the information indicated on this report or supplemental 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 changed, or on an attachment with an address, with all other like enpowered.