

# 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Apr 14, 2008 8:00 am**  
**Secretary of State**

04-14-2008 90051 015 \*\*\*\*61.25

**DOCUMENT # 742750**

1. Entity Name  
CANTERBURY G CONDOMINIUM ASSOCIATION, INC.



Principal Place of Business  
CANTERBURY G165  
CENTURY VILLAGE  
WEST PALM BEACH, FL 33417 US

Mailing Address  
CANTERBURY G165  
CENTURY VILLAGE  
WEST PALM BEACH, FL 33417 US

**40068112**



2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

02272008 Chg-NP CR2E037 (12/06)

City & State

City & State

4. FEI Number  
59-1655323

Applied For  
Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

SPANDORF, PHILIP  
165 CATERBURY G  
WEST PALM BEACH, FL 33417

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

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 the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**Filing Fee is \$61.25**  
**Due by May 1, 2008**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$5.00** May Be  
Added to Fees

**Make check payable to**  
**Florida Department of State**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE PD ☒ Delete  
NAME SPANDORF, PHIL  
STREET ADDRESS CANTERBURY G-165  
CITY-ST-ZIP WEST PALM BEACH, FL 33417

TITLE PD ☒ Change ☐ Addition  
NAME TAITE, CLIFFORD  
STREET ADDRESS 119 SANDRA - DOLLARD DES ORMEAUX  
CITY-ST-ZIP QUEBEC, CA H9A1L 501-2340585

TITLE VP ☒ Delete  
NAME WHITE, BILL  
STREET ADDRESS 156 CANTERBURY G  
CITY-ST-ZIP WEST PALM BEACH, FL 33417

TITLE ☒ Change ☐ Addition  
NAME CHAIKEN ESTILE (V.P.)  
STREET ADDRESS 160 CANTERBURY G  
CITY-ST-ZIP WPA FL 33417

TITLE TD ☒ Delete  
NAME DOOLEY, GLORIA MS  
STREET ADDRESS 157 CANTERBURY G  
CITY-ST-ZIP WEST PALM BEACH, FL 33417

TITLE ☒ Change ☐ Addition  
NAME PHILIP SPANDORF  
STREET ADDRESS 165 CANTERBURY G  
CITY-ST-ZIP WEST PALM BEACH FL 33417-1371

TITLE SD ☒ Delete  
NAME SPANDORF, TERRY  
STREET ADDRESS CANTERBURY G-165  
CITY-ST-ZIP WPA BEACH, FL 33417

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE VD ☐ Delete  
NAME ROSSETTI, FAYE MS  
STREET ADDRESS 163 CANTERBURY G  
CITY-ST-ZIP WEST PALM BEACH, FL 33417

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME TEODORESCH, RODICA MS  
STREET ADDRESS 166 CANTERBURY G  
CITY-ST-ZIP WEST PALM BEACH, FL 33417

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental reports 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

MAR 29, 2008 501-647-9481

Date

Daytime Phone #