

# 2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 754374

FILED  
Feb 10, 2011  
Secretary of State

**Entity Name:** PRESTON AT CENTURY VILLAGE CONDOMINIUM ASSOCIATION, INC.

**Current Principal Place of Business:**

%PRIME MANAGEMENT GROUP  
9045 LA FONTANA BLVD., SUITE 219  
BOCA RATON, FL 33434

**New Principal Place of Business:**

%THE CONTINENTAL GROUP, INC.  
9045 LA FONTANA BLVD., SUITE 219  
BOCA RATON, FL 33434

**Current Mailing Address:**

%PRIME MANAGEMENT GROUP  
9045 LA FONTANA BLVD., SUITE 219  
BOCA RATON, FL 33434

**New Mailing Address:**

%THE CONTINENTAL GROUP, INC.  
9045 LA FONTANA BLVD., SUITE 219  
BOCA RATON, FL 33434

FEI Number: 59-2204264

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

PASTMAN, ADELLE  
3 PRESTON A  
BOCA RATON, FL 33434 US

**Name and Address of New Registered Agent:**

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.

SIGNATURE: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

**OFFICERS AND DIRECTORS:**

Title: PD  
Name: PASTMAN, ADELLE  
Address: 3 PRESTON A  
City-St-Zip: BOCA RATON, FL 33434

Title: TD  
Name: RUBIN, CLAIRE  
Address: PRESTON E-208  
City-St-Zip: BOCA RATON, FL 33434

Title: TD  
Name: SCHWARTZ, SYDNEY  
Address: 133 PRESTON D  
City-St-Zip: BOCA RATON, FL 33434

Title: VD  
Name: VINIKOFF, SHEILA  
Address: 318 PRESTON H  
City-St-Zip: BOCA RATON, FL 33434

Title: D  
Name: CHELOTTI, KAREN  
Address: 105 PRESTON C  
City-St-Zip: BOCA RATON, FL 33434

Title: SD  
Name: KRINER, ESTHER  
Address: 339 PRESTON I  
City-St-Zip: BOCA RATON, FL 33434

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with all other like empowered.

SIGNATURE: ADELLE PASTMAN

P

02/10/2011

\_\_\_\_\_ Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date