FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

Secretary of State

DIVISION OF CORPORATIONS

1996

SIGNATURE: _

SIGNATURE AND TYPED OR PRINTED NAME OF SIGN

DOCUMENT # N9400001811 (8)

THE STRATFORD "A" CONDOMINIUM ASSOCIATION AT CENTURY VILLAGE, INC.

Principal Place of Business Mailing Address					
11 STRATFORD "A" W PALM BEACH FL 33417 W PALM BEACH FL			33417		
VI I THE PERMITTE WITH		W WILLIAM CENSON VE SON		3. Date Incorporated or Qualified 04/11/1994	3a. Date of Last Report 05/01/1995
2. Principal Place	e of Business	2a. Mailing Address		4. FEI Number	Applied For
1		26		59-1550726	Not Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required
City II Ctata		City & State		6. Election Campaign Financing	\$5.00 May Be
City & State		28		Trust Fund Contribution	Added to Fees
Zip	Country	Zip	Country	8. This corporation has liability for in	ntangible tax under s. 199.032,
]	25	29	30	Florida Statutes	Yes No
	9. Name and Address of Curre	nt Registered Agent		10. Name and Address of New R	egistered Agent
			81 Name		
	KEY, WILLIAM		82 Street Ad	dress (P.O. Box Number is Not Acceptable	e)
	ORGIA AVE.		83		
W PALM BEACH FL 33405			55		
			84 City		E 85 Zip Code
11 Duramant to	the provisions of Sections 617.050	12 and 617 1508. Florida Stat	utes, the above-named corp	oration submits this statement for the pur	nose of changing its registered offi
or registeren	diagent, or both, in the State of Flo.	rida. Such change was autho	rized by the corporation's bo	pard of directors. I hereby accept the appo	pintment as régistered agent. Lam
familiar with,	, and accept the obligations of, Sec	ction 617.0503, Florida Statut	es.		
signature	ignature, typed or printed name of registered age	rit and title if applicable	NOTE: Registered Agent signature requ	ired when renstating)	DATE
12.		ND DIRECTORS	13.	ADDITIONS/CHANGES TO OFF	ICERS AND DIRECTORS IN 12
TITLE	PD	DELETE	1 1 TITLE		Change Addition
IAME	MANGO, FRED		1.2 NAME		
STREET ADDRESS	11 STRATFORD "A"		1.3 STREET ADDRESS		
CITY-S1-ZIP	W PALM BEACH FL 33417		1.4 CITY - ST - ZIP		
TITLE	VD	☐ DELETE	2 1 TITLE		☐ Change ☐ Addition
NAME	ROSENFELD, DAVID		2 2 NAME		
STREET ADDRESS	14 STRATFORD "A"		2 3 STREET ADDRESS		
CITY-ST-ZIP	W PALM BEACH FL 33417	r Inciere	2 4 CITY - ST - ZIP		Change Addition
TITLE	SD 5	DELETE	31 TITLE		Onlings
NAME	GOLD, E		3.2 NAME 3.3 STREET ADDRESS		
STREET ADDRESS	11 STRATFORD A W PALM BEACH FL 33417		3 4. CITY-ST-ZIP		
CITY-ST-ZIP TITLE	TD	DELETE	41 TIPLE		☐ Change ☐ Addition
NAME	BIERBAUM, I		4 2 NAME		
STREET ADDRESS	10 STRATFORD A		4.3 STREET ADDRESS		
CITY-ST-ZIP	W PALM BEACH FL 33417		4.4 CITY - ST - ZIP		
TIFLE	D	DELETE	5 1 TITLE		Change Addition
NAME	PALEY, J		5 2 NAME		
STREET ADDRESS	5 STRATFORD "A"		5.3 STREET ADDRESS		
CITY-ST-ZIP	W PALM BEACH FL 33417		5.4 CITY - ST - ZIP		
TITLE		DELETE	61 TITLE		Change Addition
NAME			6 2 NAME		
STREET ADDRESS			63 STREET ADDRESS		
CITY - ST - ZIP			6.4 CITY - ST - ZIP		07/0WA Florida Ctatutas 16 de -
certify that oath: that I	the information indicated on this or	nnual report or supplemental a poration or the receiver or tru	annual report is true and acc istee empowered to execute	fy for the exemption stated in Section 119 urate and that my signature shall have the this report as required by Chapter 617, F	e same legal effect as il mage und