

FILE NOW: FILING FEE IS \$61.25

NONPROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # N94000001815 (9)

1. Corporation Name

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

Principal Place of Business

3700 GEORGIA AVE.
W PALM BEACH FL 33405

Mailing Address

3700 GEORGIA AVE.
W PALM BEACH FL 33405



3. Date Incorporated or Qualified
04/11/1994

3a. Date of Last Report
05/01/1995

2. Principal Place of Business

21 Suite, Apt. #, etc.

23 City & State

24 Zip

Country

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip

Country

4. FEI Number

59-1550730

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

MCCLOSKEY, WILLIAM
3700 GEORGIA AVE.
W PALM BEACH FL 33405

10. Name and Address of New Registered Agent

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's signature required when re-registering)

DATE

12. OFFICERS AND DIRECTORS

TITLE PD
NAME PRINCE, ESTHER
STREET ADDRESS 109A STRATFORD "H"
CITY-ST-ZIP W PALM BEACH FL 33417 ☒ DELETE

TITLE SD
NAME ROBBINS, HAROLD
STREET ADDRESS 109 STRATFORD "H"
CITY-ST-ZIP W PALM BEACH FL 33417 ☒ DELETE

TITLE VD
NAME SCOCCO, ALEXANDER
STREET ADDRESS 107 STRATFORD "H"
CITY-ST-ZIP W PALM BEACH FL 33417 ☐ DELETE

TITLE T
NAME ROBBINS, HAROL
STREET ADDRESS 104 STRATFORD H
CITY-ST-ZIP W PALM BEACH FL 33417 ☒ DELETE

TITLE D
NAME RAY, ESTELL
STREET ADDRESS 102A STRATFORD H"
CITY-ST-ZIP W PALM BEACH FL 33417 ☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE PD
1.2 NAME HAROLD ROBBINS
1.3 STREET ADDRESS 109 STRATFORD H
1.4 CITY-ST-ZIP W. PALM BEACH FL 33417 ☒ Change ☐ Addition

2.1 TITLE SD
2.2 NAME ROSE CALDERON
2.3 STREET ADDRESS 101 STRATFORD H
2.4 CITY-ST-ZIP W. PALM BEACH, FL 33417 ☒ Change ☐ Addition

3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP ☐ Change ☐ Addition

4.1 TITLE T
4.2 NAME ROBERT SAPOLSKY
4.3 STREET ADDRESS 109A STRATFORD H
4.4 CITY-ST-ZIP W. PALM BEACH, FL 33417 ☒ Change ☐ Addition

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

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP ☐ Change ☐ Addition

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

HAROLD ROBBINS

Date

Daytime Phone #

4/22/96

471-4681

CR2E037 (12/95)