## FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandre B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

1997

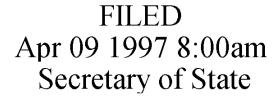
DOCUMENT # 74605

(9)

DORSET AT CENTURY VILLAGE CONDOMINIUM ASSOCIATION, INC.

Principal Place of Business 374 DORSET I BOCA RATON FL 33434-6115 Mailing Address

374 DORSET I BOCA RATON FL 33434-6115





						3. Date Incorporated or Qualified 02/26/1979	3a. Date 0	18/19	eport 96	
2. Principal Place of Business		2a. Mailing Address	2a. Mailing Address			4. FEI Number Applied For			plied For	
21		26	26			59-2145895		No	t Applicable	
			e, Apt. #, etc.			5. Certificate of Status Desired	\$		Additional	
22		27				5. Continuate of Olding Desired	<u> </u>	Fee Re	equired	
City & Stat	City & State	y & State			6. Election Campaign Financing	_ :		May Be		
23	[28]			Country		Trust Fund Contribution		Added		
Zip	Country	Zip				8. This corporation has liability for intangible tax under s. 199.032,				
24	29  s of Current Registered Agent	30]	Florida Statutes Yes No  10. Name and Address of New Registered Agent							
<del></del>	B. Hamb and Address	or current negratored Agent		81 Namo						
WATER		L								
WATERN 374 DOF		14	82 Street Address (P.O. Box Number is Not Acceptable)							
BOCA R		<u> </u>	33							
שטטא ה										
		- 14	34 City		FL 85 Zip Code					
11. Pursuant to the provisions of Sections 617.0502 and 617.1508. Florida Statules, the above pamed corporation submits this statement for the purpose of changing its registered.										
flice 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 (NO15: Registered Agent signature required when reinstating)  DATE										
12.		ICERS AND DIRECTORS	13.			ADDITIONS/CHANGES TO OFFIC	ERS AND DIF	RECTOR	S IN 12	
TITLE	DELETE DELETE		1.1 7(1)	1.1 TITLE		P. /		Change	Addition	
NAME	FINKEL, SID AVRICH, JOSEPH			12 NAME 4		DRSET A 17			$\sim$	
STREET ADDRESS	TADDRESS DORSET A 45- 17			1.3 STREET ADDRESS		ORSET A 17			- 1	
CITY-ST-ZIP	BOCA RATON FL			1.4 CITY-ST-ZIP		OCA RATON, FL			}	
TITLE	PD DELETE			<u></u>				Change	Addition	
NAME	WATERMAN, ROBERT			2.2 NAME					1	
STREET ADDRESS	ss 374 DORSET I			2.3 STREET ADDRESS					Ì	
CITY-ST-ZIP	BOCA RATON FL			Y-SI-ZIP		•			į	
TITLE	EO DELETE			3.1 111.€				Change	Addition	
NAME	BUCKSTEIN, AL			<b>IE</b>	]				]	
STREET ADDRESS	348 DORSET I			ET ADDRESS					]	
CITY-ST-ZIP	BOCA RATON FL			/-ST-ZIP	]				Ì	
TITLE	D DELETE			F .				Change	Addition	
NAME	RUGOFF, ROBERT		4. 2 NA	4. 2 NAME					ŀ	
STREET ADDRESS	164 DORSET D		4.3 STR	ET ADDRESS		· ·			Ì	
CITY-ST-ZIP	BOCA RATON FL		4.4 C/TY	- ST - ZIP						
TITLE	\$ DELETE		5.1 7ITL	5.1 TITLE				Change	Addition	
NAME }	HOLLANDER, SYLVIA	4	5 2 NAM	E	}				j	
STREET ADDRESS	234 DORSET F		5.3 STR	ET ADDRESS					{	
CITY-ST-ZIP	BOCA RATON FL			- \$1 - ZIP						
TITLE	V	DELETE	6.1 TITL		1			Change	Addition	
NAME	KOSLOF, IRVING		6.2 NAM	E		·			1	
STREET ADDRESS	194 DORSET E		6.3 STRI	ET ADDRESS	1		:		Ì	
CITY-ST-ZIP	BOCA RATON FL			- S1 - ZIP		<u> </u>	<u> </u>			
14. I do 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 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 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 annual report or supplemental annual report is true and accurate and that my signature shall have the same legal selfect as if made under oath; that										