FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

PROFIT **CORPORATION ANNUAL REPORT**

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # 694860

(8)

CENVILL RECREATION, INC.

		1.	

FILED Apr 23 1997 8:00am Secretary of State

Dd-ylasi Dlas	ad Dusiness	Molling Address					
100 CENTURY	. ADMIN BLDG	Mailing Address CENTURY VILL ADMIN BLC 100 CENTURY BLVD. WEST PALM BEACH FL 33					
					3. Date Incorporated or Qualified 07/16/1981	3a. Date of Last Repo 04/26/1996	ırt
	lace of Business	2a. Mailing Address			4. FEI Number	Applie	d For
21		26	<u></u> .		59-2107653		pplicable
Sulte, Apt.	#, etc.	Suite, Apt. #, etc.			5. Certificate of Status Desired	S8.75 Addi	
City & Stat	e	City & State			Election Campaign Financing Trust Fund Contribution	\$5.00 May Added to Fo	
Žip	Country	Zip	Zip Country		8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes Yes No		
24	25 Name and Address of Curre		30		Florida Statutes 10. Name and Address of New R		
		ir magistaran Masiit	8	1 Name	10. Hamie and Addiess of New Pi	AB-Ashian Whole	
	Y,MARK F. YTURY VILLAGE ADMINISTRATIO)n Bldg.	8				
· 100	CENTURY BLVD.				et Address (P.O. Box Number is Not Acceptable)		
WE:	ST PALM BEACH FL FL 33417		8	3			
				4 City		FL 85 Zip Cod	
11. Pursuant	to the provisions of Sections 607.050	02 and 607.1508, Florida Statuto	es, the abo	ve-named col	rporation submits this statement for the ation's board of directors. I hereby acce	purpose of changing its re	gistered
agent. I a	am familiar with, and accept the oblig	ations of, Section 607.0505, Fig	orida Statut	es.	anono board or anothers. Thereby acce	,p, the appointment to reg	
SIGNATURE	Signature, typed or printed name of registered ag	ent and title if applicable (NO1)	E Registered A	gent signature regi	ured when reinstating)	DATE	
12.		ID DIRECTORS	13.		ADDITIONS/CHANGES TO OFFI	CERS AND DIRECTORS IN	N 12
TITLE	DST	☐ DELETE	1.1 TITU			Change _	Addition
NAME	LEVY,H.IRWIN		1.2 NAM	E			
STREET ADDRESS	100 CENTURY BLVD.		1.3 STR	ET ADDRESS			
CITY-ST-ZIP	W. PALM BCH FL	□ DELETE		- ST - ZIP		Channe	Addition
TITLE	DP C	☐ DELETE	2.1 TITLE			L Change L	T Manipoli
NAME	LEVY,MARK F. 100 CENTURY BLVD.		2.2 NAM				
STREET ADDRESS	W. PALM BCH FL			ET ADDRESS			
CITY-ST-ZIP TITLE	D VI. PALM BOTT I	DELETE	3.1 TITL	r-ST-ZIP		Change	Addition
NAME	PESECKIS, LYNN L.		3.2 NAM			· J	_
STREET ADDRESS	100 CENTURY BLVD.		1	ET ADDRESS			
CITY-ST-ZIP	W. PALM BCH FL			r-ST-ZIP			
TITLE	AT	☐ DELETE	4.1 1011			Change	Addition
NAME	SHAPIRO, STUART		4. 2 NAM	ME			ĺ
STREET ADDRESS	100 CENTURY BLVD.		4.3 STR	ET ADDRESS			
CITY-ST-ZIP	W. PALM BCH FL 33417	······································		-ST-ZIP			31 7 1 200
TITLE	AS	DELETE	51 TITL			☐ Change	Addition
NAME	FREIDMAN, LAURA		5 2 NAM				
STREET ADDRESS	100 CENTURY BLVD.			ET ADDRESS			
CITY-ST-ZIP	W. PALM BCH. FL 33417	DELETE		- ST - ZIP		☐ Change	Addition
TITLE		[_] DELETE	6.1 TITL	1		∟ Criange L	AUUIUUI
NAME			6.2 NAM				
STREET ADDRESS				ET ADDRESS			
CITY-ST-ZIP			6.4 CITY	- S1 - ZIP			

14. I do hereby certify that the information supplied with this filing 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 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 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.