

MP

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Feb 17 1998 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra Br. Wertham Secretary of State DIVISION OF CORPORATIONS
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2158

DOCUMENT # N17885 (7)
1. Corporation Name
BUCKINGHAM AT CENTURY VILLAGE CONDOMINIUM #II AS SOCIATION, INC.



Principal Place of Business ARISTA SOUTH 12289 PEMBROKE RD. SUITE 106 PEMBROKE PINES FL 33025	Mailing Address ARISTA SOUTH 12289 PEMBROKE RD. SUITE 106 PEMBROKE PINES FL 33025
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3. Date Incorporated or Qualified 11/20/1986	
4. FEI Number 65-0035398	<input type="checkbox"/> Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired	<input type="checkbox"/> \$8.75 Additional Fee Required <input type="checkbox"/> \$5.00 May Be Added to Fees
6. Election Campaign Financing Trust Fund Contribution	
7. Is this nonprofit corporation a homeowners association? <input type="checkbox"/> Yes <input type="checkbox"/> No	
8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input type="checkbox"/> No	

2. Principal Place of Business	2a. Mailing Address
21	26
Suite, Apt. #, etc.	Suite, Apt. #, etc.
22	27
City & State	City & State
23	28
Zip	Zip
24	29
Country	Country
25	30

9. Name and Address of Current Registered Agent	
ARISTA SOUTH 12289 PEMBROKE RD. SUITE 106 PEMBROKE PINES FL 33025	

10. Name and Address of New Registered Agent	
81 Name	
82 Street Address (P.O. Box Number is Not Acceptable)	
83	
84 City	85 Zip Code
	FL

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 *Charlie Davis* **Reg Agent** **DATE** 1-13-98

12. OFFICERS AND DIRECTORS	
TITLE	NAME
PD	JULIAND, FRANK
STREET ADDRESS	901 SW V128TH AVE
CITY-ST-ZIP	PEMBROKE PINES FL
<input checked="" type="checkbox"/> DELETE	
TITLE	NAME
VPD	SILVERMAN, FRAN
STREET ADDRESS	12800 SW 7TH CT
CITY-ST-ZIP	PEMBROKE PINES FL
<input checked="" type="checkbox"/> DELETE	
TITLE	NAME
STD	JANU, RUDY
STREET ADDRESS	701 SW 128TH AVE
CITY-ST-ZIP	P.P. FL
<input type="checkbox"/> DELETE	
TITLE	NAME
STREET ADDRESS	
CITY-ST-ZIP	
<input type="checkbox"/> DELETE	
TITLE	NAME
STREET ADDRESS	
CITY-ST-ZIP	
<input type="checkbox"/> DELETE	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
1.1 TITLE	1.2 NAME
D	Sec/Treas.
1.3 STREET ADDRESS	1.4 CITY-ST-ZIP
Enid Ellman	901 SW 128th Ave.
	P.P. Fla 33027
<input type="checkbox"/> Change <input type="checkbox"/> Addition	
2.1 TITLE	2.2 NAME
D	U.P.
2.3 STREET ADDRESS	2.4 CITY-ST-ZIP
marion Hyman	12800 SW 7th Ct.
	P.P. Fla 33027
<input type="checkbox"/> Change <input type="checkbox"/> Addition	
3.1 TITLE	3.2 NAME
D	President
3.3 STREET ADDRESS	3.4 CITY-ST-ZIP
Rudy Janu	701 SW 128th Ave.
	P.P. Fla 33027
<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	
4.1 TITLE	4.2 NAME
4.3 STREET ADDRESS	4.4 CITY-ST-ZIP
<input type="checkbox"/> Change <input type="checkbox"/> Addition	
5.1 TITLE	5.2 NAME
5.3 STREET ADDRESS	5.4 CITY-ST-ZIP
<input type="checkbox"/> Change <input type="checkbox"/> Addition	
6.1 TITLE	6.2 NAME
6.3 STREET ADDRESS	6.4 CITY-ST-ZIP
<input type="checkbox"/> Change <input type="checkbox"/> Addition	

14. I 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 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: *Rudy Janu* **DATE:** 1-13-98 **FILE NO:** 43-5888

CR2E037 (10/97)

Dep \$61.25