2000 UNIFORM BUSINESS REPORT (UBR)

FILED
Jul 12, 2000 8:00 am
Secretary of State
04-25-2000 90324 001 15,006.25

DOCUMENT # 740816

1. Entity Name

TILFORD "S" CONDOMINIUM ASSOCIATION, INC.

Principal Place of Business	Mailing Address
BASIL HALES 407 TILFORD S DEERFIELD BEACH FL 33442	BASIL HALES 407 TILFORD S DEERFIELD BEACH FL 33442-2008

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	3. Mailing Address
TILFORD S	SAME
Suite, Apt. #, etc.: 407	Suite, Apt. #, etc.
City & State: DEERFIELD BEACH	City & State: SAME
Zip: 33442 Country: BROWARD	Zip: Country:

4. FEI Number: 59-1981018 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
CONDOMINIUM OWNERS ORGNIZATION CENTURY VILLAGE E, INC. 3501 WEST DRIVE DEERFIELD BEACH FL 33442-2085	Name Street Address (P.O. Box Number Is Not Acceptable) City FL Zip Code

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the state of Florida.

SIGNATURE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW: FEE IS $61.25	9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees	Make Check Payable to Department of State

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	SD KEILER, PEARL TILFORD S 412 DEERFIELD BEACH FL	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	SD MARY STRAUB TILFORD S 396 DEERFIELD BEACH FL	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VP POSNER, FLORENCE TILFORD S 394 DEERFIELD BEACH FL	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D GOODFINGER, D TILFORD S 398 DEERFIELD BEACH FL	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D ZEITZOFF, MAE TILFORD S 393 DEERFIELD BEACH FL	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D LENORE TOLKANITD (TREASURER) TILFORD S 401 DEERFIELD BEACH	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	DP HALES, BASIL TILFORD S 407 DEERFIELD BEACH FL	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition

CR2E037 (9/99)

12. 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 report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Basil Hales BASIL HALES 1/4/00 954-426-3763
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #