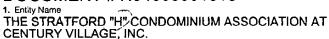
2006 NOT-FOR-PROFIT CORPORATION

ANNUAL REPORT

DOCUMENT # N94000001815





FILED

Apr 24, 2006 8:00 am Secretary of State

04-24-2006 90440 013 ****61.25

CENTUR	Y VILLAĠE, INC.						
104 STRATFORD H 370		Mailing Address 3700 GEORGIA AVE. W PALM BEACH, FL 33405			500	1601	4
l.							
2. Principal Place of Business 3. M		. Mailing Address					
Suite, Apt. #, etc.		Suite, Apt. #, etc.		04052006 Ch	g-NP CR2E037	7 (11/05)	
City & State		City & State		4. FEI Number 59-1550730)		plied For t Applicable
Zip	Country	Zip	Country	5. Certificate of Sta	tus Desired	8.75 Add	itional
	6. Name and Address of Current Re	pistered Agent		7. Name and Addr	ess of New Registered A	gent	
PEARL'SHNEY-STRATFORD		<u> </u>	- Name				
164 STRATFORD L WEST PALM BEACH, FL 33417			Street Address		ot Acceptable)		
			City		FL	Zip Code	9
	named entity submits this statement for thions of registered agent.	e purpose of changing its re	l egistered office or reg	gistered agent, or both, in t	he State of Florida. I am fa	amiliar with,	and accept
SIGNATURE .	Signature, typed or printed name of registered agent and	itle if applicable. (NOTE: F	Registered Agent signature rec	quired when reinstating)	DATE		
Filing Fee is \$61.25 Due by May 1, 2006							
	-	9. Election Camp Trust Fund Co		\$5.00 May Be Added to Fees	Make check Florida Depart		
10.	Due by May 1, 2006 OFFICERS AND DIRECT	Trust Fund Co		Added to Fees	Florida Depart	ment of St ECTORS IN	ate
TITLE NAME STREET ADDRESS	Due by May 1, 2006 OFFICERS AND DIRECT PD JOHNSON, DELANO 104 STRATFORD H	Trust Fund Co	11. TITLE NAME STREET ADDRESS	Added to Fees	Florida Depart	ment of St	ate
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Due by May 1, 2006 OFFICERS AND DIRECT PD JOHNSON, DELANO 104 STRATFORD H W PALM BCH, FL	Trust Fund Co	11. TITLE NAME STREET ADDRESS CITY-ST-ZIP	Added to Fees	Florida Departs S TO OFFICERS AND DIR	ECTORS IN	10 Addition
TITLE NAME STREET ADDRESS	Due by May 1, 2006 OFFICERS AND DIRECT PD JOHNSON, DELANO 104 STRATFORD H	Trust Fund Co	11. TITLE NAME STREET ADDRESS	Added to Fees	Florida Departs S TO OFFICERS AND DIR	ment of St ECTORS IN	ate 10
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	Due by May 1, 2006 OFFICERS AND DIRECT PD JOHNSON, DELANO 104 STRATFORD H W PALM BCH, FL SD WELLS, DORIS 105 STRATFORD H	Trust Fund Co	11. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	Added to Fees	Florida Departs S TO OFFICERS AND DIR	ECTORS IN	10 Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	Due by May 1, 2006 OFFICERS AND DIRECT PD JOHNSON, DELANO 104 STRATFORD H W PALM BCH, FL SD WELLS, DORIS	Trust Fund Co TORS Delete Delete	11. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	Added to Fees	Florida Departs S TO OFFICERS AND DIR	ment of St ECTORS IN Change Change	10 Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	Due by May 1, 2006 OFFICERS AND DIRECT PD JOHNSON, DELANO 104 STRATFORD H W PALM BCH, FL SD WELLS, DORIS 105 STRATFORD H WEST PALM BEACH, FL 33417 T ROBBINS, HAROLD	Trust Fund Co	TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	Added to Fees	Florida Departs S TO OFFICERS AND DIR	ECTORS IN	10 Addition
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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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: 1