## 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N94000001810

FILED Mar 26, 2009 Secretary of State

Entity Name: THE STRATFORD "C" CONDOMINIUM ASSOCIATION AT CENTURY VILLAGE, INC.

**Current Principal Place of Business: New Principal Place of Business:** 

29 STRATFORD C 30 STRATFORD C

W PALM BEACH, FL 33417 WEST PALM BEACH, FL 33417 US

**Current Mailing Address: New Mailing Address:** 

SEACREST SERVICES INC 29 STRATFORD C 2400 CENTREPARK W DR #175 W PALM BEACH, FL 33417 WEST PALM BEACH, FL 33409 US

FEI Number: 59-1550728 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

STRATFORD OF CENTURY INC SHNEYER, PEARL 164 STRATFORD L 164 STRATFORD L

W PALM BEACH, FL 33417 WEST PALM BEACH, FL 33417 US US

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: PEARL SHNEYER 03/26/2009

> Electronic Signature of Registered Agent Date

## **OFFICERS AND DIRECTORS:**

37 STRATFORD C

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

42 STRATFORD C

(X) Change ( ) Addition () Delete

PIAZZA, ANNETTE JANIS, GORDON Name: Name: 29 STRATFORD C Address: 30 STRATFORD C Address:

City-St-Zip: W PALM BEACH, FL 33417 City-St-Zip: WEST PALM BEACH, FL 33417 US

Title: Title: () Delete (X) Change ( ) Addition PEARL, HAHN Name: HAHN, PEARL Name:

Address: 34 STRATFORD C. Address: 34 STRATFORD C

City-St-Zip: WEST PALM BEACH, FL 33417 City-St-Zip: WEST PALM BEACH, FL 33417 US

Title: () Delete Title: (X) Change ( ) Addition LIEBERMAN, BELLA KOHLER, GEDALIA Name: Name:

Address: City-St-Zip: WEST PALM BEACH, FL 33417 City-St-Zip: WEST PALM BEACH, FL 33417 US

Title: VPD ( ) Delete Title: (X) Change ( ) Addition

Name: KOHLER, GEDALIA Name: PIAZZA, ANNETTE 29 STRATFORD C Address: 42 STRATFORD C Address:

City-St-Zip: WEST PALM BEACH, FL 33417 City-St-Zip: WEST PALM BEACH, FL 33417 US

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

Address:

SIGNATURE: ANDREW ROSEN MR 03/26/2009