# Entity Name: PRESTON AT CENTURY VILLAGE CONDOMINIUM ASSOCIATION, INC.

2021 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

#### **Current Principal Place of Business:**

FIRST SERVICE RESIDENTIAL 9045 LA FONTANA BLVD., SUITE 219 BOCA RATON, FL 33434

## **Current Mailing Address:**

**DOCUMENT# 754374** 

FIRST SERVICE RESIDENTIAL 9045 LA FONTANA BLVD., SUITE 219 BOCA RATON, FL 33434 US

## FEI Number: 59-2204264

### Name and Address of Current Registered Agent:

WASSERSTEIN, P.A. 301 YAMATO ROAD, SUITE 2199 BOCA RATON, FL 33431 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:

Electronic Signature of Registered Agent

### **Officer/Director Detail :**

Title	DIRECTOR	Title	PRESIDENT
Name	APOLLO, BENJAMIN	Name	ROSENFELD, CHARLES
Address	113 PRESTON C	Address	346 PRESTON I
City-State-Zip:	BOCA RATON FL 33434	City-State-Zip:	BOCA RATON FL 33434
Title	TREASURER	Title	SECRETARY
Name	ORTSMAN, SUZAN	Name	SNYDER, STEVEN
Address	322 PRESTON H	Address	292 PRESTON G
City-State-Zip:	BOCA RATON FL 33434	City-State-Zip:	BOCA RATON FL 33434
Title	DIRECTOR	Title	DIRECTOR
Title Name	DIRECTOR ALTHOLZ, TOBI	Title Name	DIRECTOR MONTEKIO, LAWRENCE
Name	ALTHOLZ, TOBI	Name	MONTEKIO, LAWRENCE
Name Address	ALTHOLZ, TOBI 138 PRESTON D	Name Address	MONTEKIO, LAWRENCE 40 PRESTON A
Name Address City-State-Zip:	ALTHOLZ, TOBI 138 PRESTON D BOCA RATON FL 33434	Name Address City-State-Zip:	MONTEKIO, LAWRENCE 40 PRESTON A BOCA RATON FL 33434
Name Address City-State-Zip: Title	ALTHOLZ, TOBI 138 PRESTON D BOCA RATON FL 33434 DIRECTOR	Name Address City-State-Zip: Title	MONTEKIO, LAWRENCE 40 PRESTON A BOCA RATON FL 33434 DIRECTOR
Name Address City-State-Zip: Title Name Address	ALTHOLZ, TOBI 138 PRESTON D BOCA RATON FL 33434 DIRECTOR CAREY, ROBERT	Name Address City-State-Zip: Title Name	MONTEKIO, LAWRENCE 40 PRESTON A BOCA RATON FL 33434 DIRECTOR DAVIS, HENRI

I hereby 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 all other like empowered.

PRESIDENT

## SIGNATURE: CHARLES ROSENFELD

Electronic Signature of Signing Officer/Director Detail

Certificate of Status Desired: No

Date

04/08/2021