

**2016 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 758302

**Entity Name:** COLONIAL CENTER ASSOCIATION, INC.

**Current Principal Place of Business:**

COLONIAL CENTER ASSOCIATION  
1230 S. FEDERAL HWY 101  
BOYNTON BEACH, FL 33435

**Current Mailing Address:**

CENTURY MANAGEMENT CONSULTANTS  
2950 JOG ROAD  
GREENACRES, FL 33467

**FEI Number:** 59-2159966

**Certificate of Status Desired:** No

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

BECKER & POLIA KOFF, P.A.  
625 N. FLAGLER DRIVE 7TH FLOOR  
WEST PALM BEACH, FL 33401 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

\_\_\_\_\_  
Date

**Officer/Director Detail :**

Title VICE PRESIDENT

Name EWING, AUBREY

Address 1230 S FEDERAL HWY, SUITE 101

City-State-Zip: BOYNTON BCH FL 33435

Title SEC. TREASURER

Name NEADEL, ROBERT

Address 1210 S FEDERAL HWY, SUITE 102

City-State-Zip: BOYNTON BEACH FL 33435

Title PRES

Name MORTON, LINDA

Address 1200 S. FEDERAL HWY SUITE 301

City-State-Zip: BOYNTON BEACH FL 33435

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.

**SIGNATURE:** LINDA MORTON

**PRESIDENT**

**04/05/2016**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date