

FILE NOW: FILING FEE AFTER MAY 1 IS \$155.00

CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
Sandra B. Morham
Secretary of State
DIVISION OF CORPORATIONS

APPROVED
AND
FILED

95 MAR -2 PH 3:00

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # 718423 (7)

1. Corporation Name

CENTURY TOWERS SOCIAL CLUB, INC.

Principal Place of Business

Mailing Address

100 KINGS PT DR
STE 302
NORTH MIAMI BEACH FL 33160
US

100 KINGS POINT DR
STE 302
NORTH MIAMI BEACH FL 33160
US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

04/28/1970

3a. Date of Last Report

04/26/1994

4. FEI Number

NOT APPLICABLE

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

☐

\$5.00 May Be
Added to Fees

7. Nonprofit with IRS 501(c)(3)
Tax Exempt Status

☒

\$68.75 Supplemental
Fee Not Required

8. This corporation has liability for intangible tax under S. 199.032,
Florida Statutes

☐ Yes

☒ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

LITTERMAN, NADINE
100 KINGS PT DR
STE 302
N. MIAMI BEACH FL 33160

81. Name

82. Street Address (P.O. Box Number is Not Acceptable)

83.

84. City

FL

85.

Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Nadine Litterman

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reappointing)

DATE

Feb 3 '95

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE	P
NAME	KANE, MIRIAM
STREET ADDRESS	100 KINGS POINT DR
CITY-ST-ZIP	N. MIAMI BEACH FL
TITLE	T
NAME	COHEN, PHYLLIS M
STREET ADDRESS	100 KINGS PT DR
CITY-ST-ZIP	N. MIAMI BEACH FL
TITLE	S
NAME	LITTERMAN, NADINE
STREET ADDRESS	100 KINGS PT DR
CITY-ST-ZIP	N. MIAMI BEACH FL
TITLE	D
NAME	FROHMAN, BERNICE
STREET ADDRESS	100 KINGS POINT DR
CITY-ST-ZIP	N. MIAMI BEACH FL
TITLE	TD
NAME	GILB, GERARD
STREET ADDRESS	100 KINGS POINT DR
CITY-ST-ZIP	N. MIAMI BEACH FL
TITLE	VD
NAME	ROSENBLUM, ARTHUR
STREET ADDRESS	100 KINGS POINT DR
CITY-ST-ZIP	N. MIAMI BEACH FL

1.1 TITLE	PD	☒ Change ☐ Addition
1.2 NAME	LITTERMAN, NADINE	
1.3 STREET ADDRESS	100 KINGS POINT DRIVE	
1.4 CITY-ST-ZIP	N. MIAMI BEACH, FL 33160	☐ Change ☐ Addition
2.1 TITLE		
2.2 NAME		
2.3 STREET ADDRESS		
2.4 CITY-ST-ZIP		
3.1 TITLE	S	☐ Change ☒ Addition
3.2 NAME	TAKIFF, GERT	
3.3 STREET ADDRESS	100 KINGS PT DRIVE	
3.4 CITY-ST-ZIP	NMBch FL 33160	
4.1 TITLE	D	☐ Change ☒ Addition
4.2 NAME	ROSE LUBIN	
4.3 STREET ADDRESS	100 KINGS PT DR	
4.4 CITY-ST-ZIP	NMIAMI BEACH, FL 33160	☐ Change ☒ Addition
5.1 TITLE	D	
5.2 NAME	ADELYN LANDSMAN	
5.3 STREET ADDRESS	100 KINGS POINT DRIVE	
5.4 CITY-ST-ZIP	N. MIAMI BCH, FL 33160	☐ Change ☐ Addition
6.1 TITLE		
6.2 NAME		
6.3 STREET ADDRESS		
6.4 CITY-ST-ZIP		

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 110.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 017, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Nadine Litterman

DATE

Feb 3 '95-3159498061

(Typed Name)