

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
May 22, 2008 8:00 am
Secretary of State

05-08-2008 90101 001 15,496.25

DOCUMENT # 728058 1. Entity Name DURHAM "C" CONDOMINIUM ASSOCIATION, INC.					
Principal Place of Business CONDO OWNERS ORG OF CENTURY VILLAGE E 3501 WEST DRIVE DEERFIELD BEACH, FL 33442-2085			Mailing Address CONDO OWNERS ORG OF CENTURY VILLAGE E 3501 WEST DRIVE DEERFIELD BEACH, FL 33442-2085		
2. Principal Place of Business - No P.O. Box #		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State			
Zip	Country	Zip	Country	4. FEI Number 59-1915728	
5. Certificate of Status Desired ☐				Applied For ☐ \$8.75 Additional Fee Required Not Applicable	
6. Name and Address of Current Registered Agent CONDO. OWNERS ORGAN. CENTURY VILLAGE E, INC 3501 WEST DRIVE DEERFIELD BEACH, FL 33442-2085			7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code		
8. 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. I am familiar with, and accept the obligations of registered agent.					
SIGNATURE _____ Signatures, types or printed name of registered agent and file if applicable. (NOTE: Registered Agent signature required when reissuing)					
Filing Fee is \$61.25 Due by May 1, 2008		9. Election Campaign Financing Trust Fund Contribution. ☐		\$5.00 May Be Added to Fees	
Make check payable to Florida Department of State					
10. OFFICERS AND DIRECTORS 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10					
TITLE PD NAME LIBIN, PEARL STREET ADDRESS 166 DURHAM C CITY-ST-ZIP DEERFIELD BEACH, FL 33442	☒ Delete TITLE PD NAME IRA GROSSMAN STREET ADDRESS 20 Newport A CITY-ST-ZIP D.B.H. 33442 ☐ Change ☒ Addition				
TITLE D NAME KRAMER, CHARLOTTE STREET ADDRESS 169 DURHAM C CITY-ST-ZIP DEERFIELD BCH, FL 33442	☐ Delete TITLE UD NAME M. GROSSMAN STREET ADDRESS 20 Newport A CITY-ST-ZIP D.B.H. 33442 ☐ Change ☒ Addition				
TITLE VD NAME SINGER, TOBY STREET ADDRESS 162 DURHAM C CITY-ST-ZIP DEERFIELD BEACH, FL 33442	☒ Delete TITLE D NAME Pearl LIBIN STREET ADDRESS 166 Durham c CITY-ST-ZIP D.B.H. 33442 ☐ Change ☒ Addition				
TITLE T NAME GROSSMAN, MICHELLE STREET ADDRESS 20 NEWPORT A CITY-ST-ZIP DEERFIELD BEACH, FL 33442	☐ Delete TITLE D NAME TOBY SINGER STREET ADDRESS 162 Durham c CITY-ST-ZIP D.B.H. 33442 ☐ Change ☒ Addition				
TITLE SD NAME KRAMER, CHARLOTTE STREET ADDRESS 169 DURHAM C CITY-ST-ZIP DEERFIELD BEACH, FL 33442	☐ Delete TITLE D NAME Michael Loquidice STREET ADDRESS 20 Newport A CITY-ST-ZIP D.B.H. 33442 ☐ Change ☒ Addition				
TITLE D NAME OLINSKY, LEONARD STREET ADDRESS 175 DURHAM C CITY-ST-ZIP DEERFIELD BEACH, FL 33442	☒ Delete TITLE NAME STREET ADDRESS CITY-ST-ZIP ☐ Change ☐ Addition				
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: <u><i>Ira Grossman</i></u> Ira Grossman 4/2/08 (954) 429-9239 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR					