

# 2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 728069

1. Entity Name

DURHAM "N" CONDOMINIUM ASSOCIATION, INC.

**FILED**  
**Jul 12, 2000 8:00 am**  
**Secretary of State**

04-25-2000 90324 001 15,006.25

Principal Place of Business  
 413 DURHAM N/CVE  
 DEERFIELD BEACH FL 33442

Mailing Address  
 413  
 409 DURHAM N/CVE  
 DEERFIELD BEACH FL 33442-2545



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business  
 413 DURHAM N/CVE  
 Suite, Apt. #, etc.  
 411

3. Mailing Address  
 PHYLLIS LEVY  
 Suite, Apt. #, etc.  
 413 DURHAM N/CVE

City & State  
 DEERFIELD BEACH

City & State  
 DEERFIELD BEACH

Zip  
 33442

Country  
 FL

Zip  
 33442

Country  
 FL

4. FEI Number  
 59-1876018

Applied For  
 Not Applicable

5. Certificate of Status Desired  \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

CONDOMINIUM OWNERS OF CENTURY VILLAGE E.  
 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.

SIGNATURE *Leonard Wiener* LEONARD WIENER FEB 10, 2000  
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW: FEE IS \$61.25

9. Election Campaign Financing Trust Fund Contribution.  \$5.00 May Be Added to Fees

Make Check Payable to Department of State

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DVP FELDMAN, PHILIP DURHAM N 417 DEERFIELD BEACH FL <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D LEVY, PHILIS DURHAM N 415 DEERFIELD BEACH FL 33442 <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DP GANZELL, JENNIE DURHAM N 409 DEERFIELD BEACH FL <input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D MERANCHIK, BESSIE DURHAM N 421 DEERFIELD BEACH FL <input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D GUIDO, SUSANNA DURHAM N 416 DEERFIELD BEACH FL 33442 <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D.P. LEONARD WIENER LEONARD WIENER DURHAM N - 411 DEERFIELD BEACH FL <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	FELDMAN MALCA DURHAM N 422 DEERFIELD BEACH FL <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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: *Leonard Wiener* LEONARD WIENER FEB 10, 2000  
Signature and typed or printed name of signing officer or director Date

CR2E037 (9/98)