

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

**APPROVED  
AND  
FILED**

**CORPORATION  
ANNUAL REPORT  
1995**



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

95 MAY -1 PM 5: 15

**DOCUMENT # 729264 (2)**

1. Corporation Name

**FARNHAM "G" CONDOMINIUM ASSOCIATION, INC.**

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

300001474633  
-05/04/95--01001--001  
\*\*32760.00 \*\*\*\*130.00  
DO NOT WRITE IN THIS SPACE

Principal Place of Business Mailing Address  
**C/O FARNHAM G. 160  
CENTURY VILLAGE  
DEERFIELD BEACH FL 33442**      **C/O FARNHAM G. 160  
CENTURY VILLAGE  
DEERFIELD BEACH FL 33442**

3. Date Incorporated or Qualified **04/04/1974**      3a. Date of Last Report **05/01/1994**  
4. FEI Number **59-1921741**      Applied For Not Applicable

2. Principal Place of Business      2a. Mailing Address  
**21 C/O FARNHAM G 145**      **26 C/O FARNHAM G 145**  
Suite, Apt #, etc.      Suite, Apt #, etc.  
**22 City & State**      **27 City & State**  
**23 Zip**      **28 Country**  
**24 Zip**      **25 Country**      **29 Zip**      **30 Country**

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  
**CONDO.OWNERS ORGNZ. OF CENTURY VILLAGE E  
3501 WEST DRIVE  
DEERFIELD BEACH FL 33442-2085**

10. Name and Address of New Registered Agent  
**81 Name CONDO OWNERS ORG OF CVE, INC.**  
**82 Street Address (P.O. Box Number is Not Acceptable)**  
**83**  
**84 City**      **85 Zip Code**  
**FL**

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: \_\_\_\_\_  
Signature (Typed or Printed Name of Registered Agent and Title, as applicable)      (If (11) Registered Agent signature required, please re-signatory)      DATE

12. OFFICERS AND DIRECTORS

TITLE	<b>PD</b>
NAME	<b>KOWALCHUK, JOHN T.</b>
STREET ADDRESS	<b>FARNHAM G. APT. 160</b>
CITY, ST, ZIP	<b>DEERFIELD BEACH FL</b>
TITLE	<b>D</b>
NAME	<b>LAZAROWITZ, RICKY</b>
STREET ADDRESS	<b>FARNHAM G 145</b>
CITY, ST, ZIP	<b>DEERFIELD BEACH FL</b>
TITLE	<b>T/S</b>
NAME	<b>BRUNO, ANDREW J</b>
STREET ADDRESS	<b>FARNHAM G 147</b>
CITY, ST, ZIP	<b>DEERFIELD BEACH FL</b>
TITLE	<b>AT</b>
NAME	<b>LYNN, CHARLOTTE</b>
STREET ADDRESS	<b>FARNHAM G 150</b>
CITY, ST, ZIP	<b>DEERFIELD BEACH FL</b>
TITLE	<b>D</b>
NAME	<b>LEVY, RUTH</b>
STREET ADDRESS	<b>FARNHAM G 164</b>
CITY, ST, ZIP	<b>DEERFIELD BEACH FL</b>
TITLE	<b>D</b>
NAME	<b>ELSON, MIRIAM</b>
STREET ADDRESS	<b>FARNHAM G 157</b>
CITY, ST, ZIP	<b>DEERFIELD BCH FL</b>

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	<b>VD</b>	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	<b>BRUNO, NANCY</b>	
1.3 STREET ADDRESS	<b>FARNHAM G 147</b>	
1.4 CITY, ST, ZIP	<b>DEERFIELD BEACH, FL</b>	
2.1 TITLE	<b>PD</b>	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	<b>LAZAROWITZ, ROCHELLE</b>	
2.3 STREET ADDRESS		
2.4 CITY, ST, ZIP		
3.1 TITLE	<b>T/D</b>	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	<b>LEVINE, HANNAH</b>	
3.3 STREET ADDRESS	<b>FARNHAM G 154</b>	
3.4 CITY, ST, ZIP	<b>DEERFIELD BEACH, FL.</b>	
4.1 TITLE	<b>S</b>	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	<b>BROOKS, SILVY</b>	
4.3 STREET ADDRESS	<b>FARNHAM G 151</b>	
4.4 CITY, ST, ZIP	<b>DEERFIELD BEACH, FL.</b>	
5.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME		
5.3 STREET ADDRESS		
5.4 CITY, ST, ZIP		
6.1 TITLE	<b>D</b>	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME	<b>SLATON, NAT</b>	
6.3 STREET ADDRESS	<b>FARNHAM G 148</b>	
6.4 CITY, ST, ZIP	<b>DEERFIELD BEACH, FL</b>	

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)(b), 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 617, Florida Statutes, and that my name appears in Block 12 or Block 13 if changed, or on an amendment with an address.

SIGNATURE: *Rochelle Lazarowitz Resident Rep*      1/18/95      (305) 429-0790  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR      Date      Telephone Number  
**Rochelle Lazarowitz**