

**2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

**FILED  
Feb 11, 2009  
Secretary of State**

DOCUMENT# 729264

Entity Name: FARNHAM "G" CONDOMINIUM ASSOCIATION, INC.

**Current Principal Place of Business:**

CONDO OWNERS ORG OF CENTURY VILLAGE E  
3501 WEST DRIVE  
DEERFIELD BEACH, FL 334422085

**New Principal Place of Business:**

**Current Mailing Address:**

CONDO OWNERS ORG OF CENTURY VILLAGE E  
3501 WEST DRIVE  
DEERFIELD BEACH, FL 334422085

**New Mailing Address:**

FEI Number: 59-1921741      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

CONDO.OWNERS ORGANZ. OF CENTURY VILLAGE E  
3501 WEST DRIVE  
DEERFIELD BEACH, FL 334422085 US

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

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

**OFFICERS AND DIRECTORS:**

Title: VD ( ) Delete  
Name: LAZAROWITZ, RICKY  
Address: FARNHAM G 145  
City-St-Zip: DEERFIELD BEACH, FL

Title: PD ( ) Delete  
Name: GLICKMAN, DANIEL  
Address: FARNHAM G 153  
City-St-Zip: DEERFIELD BEACH, FL 33442

Title: TSD ( ) Delete  
Name: COTTER, ROSEMARY  
Address: FARNHAM G 155  
City-St-Zip: DEERFIELD BEACH, FL

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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 an address, with all other like empowered.

SIGNATURE: DANIEL GLICKMAN

PD

02/11/2009

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date