2001 UNIFORM BUSINESS REPORT (U

...ued amended

04-14-2001 90045 001 ... 730023

FILED

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

0010374

DOCUMENT # 730023

1. Entity Name

ELLESMERE "C" CONDOMINIUM ASSOCIATION, INC.

Principal Place of Business	Mailing Address
ANNE BERNDNOPF ELLESMERE C 174 DEERFIELD BEACH FL 33442	ANNE BERNDNOPF ELLESMERE C 174 DEERFIELD BEACH FL 33442

LA

2. Principal Place of Business		3. Mailing Address	
GAIL RANDALL		GAIL RANDALL	
Suite, Apt. #, etc. ELLESMERE C 174		Suite, Apt. #, etc. ELLESMERE C 174	
City & State DEERFIELD BEACH FL		City & State DEERFIELD BEACH, FL.	
Zip 33442	Country	Zip 33442	Country

DO NOT WRITE IN THIS SPACE

4. FEI Number 59-1881866 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

CONDOMINIUM OWNERS ORGANIZIAZTION OF CENTU
RY VILLAGE EAST, 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.

SIGNATURE ______________________

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
After September 12, 2001, min. will be $236.25

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			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD CAPUTO, BELLA ELLESMERE C 180 DEERFIELD BEACH FL	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD	☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD KOOSER, TERESA ELLESMERE C 184 DEERFIELD BCH FL	☒ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD STROBEL, RAY ELLESMERE C 172 DEERFIELD BCH, FL. 33442	☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD RANDALL, GAIL ELLESMERE C 174 DEERFIELD BCH FL	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	TSD	☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T BERNKNOPF, ANNE ELLESMERE C 179 DEERFIELD BEACH FL	☒ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	LS	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D COHEN, ESTELLE ELLESMERE C 169 DEERFIELD BCH FL	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition

CR2E037 (5/01)

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: Gail Randall GAIL RANDELL 7/17/01 (954) 427-5666

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #