

FILE NOW: FILING FEE IS \$61.25

**FILED**  
**Feb 24, 1999 8:00 am**  
**Secretary of State**

02-24-1999 90098 004 \*\*\*\*61.25

NONPROFIT CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE  
**Katherine Harris**  
 Secretary of State  
 DIVISION OF CORPORATIONS

DOCUMENT # 730030

1. Corporation Name  
**BERKSHIRE "D" CONDOMINIUM ASSOCIATION, INC.**

Principal Place of Business: BRYNA EISIG, 2060 BERKSHIRE D, DEERFIELD BEACH FL 33442  
 Mailing Address: BRYNA EISIG, 2060 BERKSHIRE D, DEERFIELD BEACH FL 33442



2. Principal Place of Business	2a. Mailing Address	3. Date Incorporated or Qualified
21	26	06/21/1974
Suite, Apt. #, etc.	Suite, Apt. #, etc.	4. FEI Number
22	27	59-1906113
City & State	City & State	5. Certificate of Status Desired
23	28	<input type="checkbox"/> \$8.75 Additional Fee Required
Zip Country	Zip Country	6. Election Campaign Financing Trust Fund Contribution
24	30	<input type="checkbox"/> \$5.00 May Be Added to Fees

9. Name and Address of Current Registered Agent	10. Name and Address of New Registered Agent
CONDOMINIUM OWNERS ORGANIZATION OF CENTURY 3501 WEST DRIVE DEERFIELD BEACH FL FL 33442-2085	81 Name
	82 Street Address (P.O. Box Number is Not Acceptable)
	83
	84 City
	FL 85 Zip Code

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, 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 617.0503, Florida Statutes.

SIGNATURE \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) DATE \_\_\_\_\_

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	DV <input type="checkbox"/> DELETE	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	REDISCH, NAOMI	1.2 NAME	
STREET ADDRESS	BERKSHIRE D-2061	1.3 STREET ADDRESS	Director
CITY-ST-ZIP	DEERFIELD BCH. FL	1.4 CITY-ST-ZIP	
TITLE	DS <input type="checkbox"/> DELETE	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	PLOTKIN, CLAIRE	2.2 NAME	
STREET ADDRESS	BERKSHIRE D 2067	2.3 STREET ADDRESS	Secretary
CITY-ST-ZIP	DEERFIELD BEACH FL	2.4 CITY-ST-ZIP	
TITLE	D <input type="checkbox"/> DELETE	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	MANDELBAUM, SYLVIA	3.2 NAME	
STREET ADDRESS	BERKSHIRE D 1056	3.3 STREET ADDRESS	Director
CITY-ST-ZIP	DEERFIELD BEACH FL	3.4 CITY-ST-ZIP	
TITLE	DV <input type="checkbox"/> DELETE	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	TOZZI, EDMUND Ruth FALLIS	4.2 NAME	
STREET ADDRESS	BERKSHIRE D 1000 3065	4.3 STREET ADDRESS	Director
CITY-ST-ZIP	DEERFIELD BEACH FL	4.4 CITY-ST-ZIP	
TITLE	P <input type="checkbox"/> DELETE	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	EISIG, BRYNA	5.2 NAME	
STREET ADDRESS	BERKSHIRE D 2060	5.3 STREET ADDRESS	President
CITY-ST-ZIP	DEERFIELD BEACH FL	5.4 CITY-ST-ZIP	
TITLE	T <input type="checkbox"/> DELETE	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	ADAMS, JEROME	6.2 NAME	
STREET ADDRESS	BERKSHIRE D 1065	6.3 STREET ADDRESS	Treas.
CITY-ST-ZIP	DEERFIELD BEACH FL	6.4 CITY-ST-ZIP	

14. 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 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 attachment with an address, with all other like empowered.

SIGNATURE: Jerome Adams SIGNATURE REQUIRED Treas 11/1/99 775-4865

CR2E037 (11/98)