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NONPROFIT
CORPORATION
ANNUAL REPORT
1999



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

DOCUMENT # 730368

1. Corporation Name

HARWOOD "I" CONDOMINIUM ASSOCIATION, INC.

330610-90163-72

Principal Place of Business

HARWOOD I -101
DEERFIELD BCH FL 33442

Mailing Address

A.J. WALLACE MGT. CONS.
P.O. BOX 273632
BOCA RATON FL 33427



2. Principal Place of Business

21 Harwood I - 94

Suite, Apt. #, etc.

22

City & State

23

Zip Country

24 25

2a. Mailing Address

26

Suite, Apt. #, etc.

27

City & State

28

Zip Country

29 30

3. Date Incorporated or Qualified

08/05/1974

4. FEI Number

59-1900515

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution ☐

\$5.00 May Be
Added to Fees

9. Name and Address of Current Registered Agent

CONDOMINIUM OWNERS ORGANIZATION OF CENTURY
3501 WEST DRIVE
DEERFIELD BEACH FL 33442-2085

10. Name and Address of New Registered Agent

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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE PD ☐ DELETE

NAME SCHEIN, HAROLD

STREET ADDRESS 94 HARWOOD I

CITY-ST-ZIP DEERFIELD BEACH FL 33442

TITLE SD ☐ DELETE

NAME RAYMAN, HARVEY

STREET ADDRESS 99 HARWOOD I

CITY-ST-ZIP DEERFIELD BEACH FL 33442

TITLE D ☐ DELETE

NAME RUBIN, BEATRICE

STREET ADDRESS HARWOOD I-93

CITY-ST-ZIP DEERFIELD BEACH FL

TITLE D ☐ DELETE

NAME FORSTER, SAM

STREET ADDRESS 86 HARWOOD I

CITY-ST-ZIP DEERFIELD BEACH FL 33442

TITLE VD ☐ DELETE

NAME HYMAN, SYLVIA

STREET ADDRESS HARWOOD I-105

CITY-ST-ZIP DEERFIELD BEACH FL

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

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: *Beatrice Rubin*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2/25/99

428-9348

Daytime Phone #

CR2E037-14/98