

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
May 01, 2001 8:00 am
Secretary of State

04-14-2001 90045 001 15,067.50

DOCUMENT # 730368

1. Entity Name

HARWOOD "I" CONDOMINIUM ASSOCIATION, INC.

Principal Place of Business

**HARWOOD I 94
 DEERFIELD BCH FL 33442**

Mailing Address

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

2. Principal Place of Business

Suite, Apt. #, etc.

3. Mailing Address

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

59-1900515

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75 Additional
 Fee Required**

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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

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**

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

TITLE	SD	☒ Delete
NAME	SCHEIN, HARRIET	
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	TRAFFICAN, ROBERT	
STREET ADDRESS	88 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		

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	SD	☐ Change ☒ Addition
NAME	QUIGLEY, CHARLES	
STREET ADDRESS	100 HARWOOD I	
CITY-ST-ZIP	DEERFIELD BEACH, FL 33442	
TITLE	PD	☒ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE	TD	☐ Change ☒ Addition
NAME	FOX, ROSE	
STREET ADDRESS	91 HARWOOD I	
CITY-ST-ZIP	DEERFIELD BEACH, FL 33442	
TITLE	D	☒ Change ☐ Addition
NAME	TRAFFICANT, ROBERT	
STREET ADDRESS	87 HARWOOD I	
CITY-ST-ZIP	DEERFIELD BEACH, FL 33442	
TITLE	D	☐ Change ☒ Addition
NAME	NEITZ, ED	
STREET ADDRESS	97 HARWOOD I	
CITY-ST-ZIP	DEERFIELD BEACH, FL 33442	
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

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:

SIGNATURE REQUIRED
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

SYLVIA HYMAN 3/29/01 (954) 421-6244

Date

Daytime Phone #

CR2E037 (10/00)