

FILE NOW: FILING FEE IS \$61.25

NONPROFIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 736654 (5)

1. Corporation Name

CENTURY FISHING AND SOCIAL CLUB, INC.



Principal Place of Business

Mailing Address

**SOMERSET K 201
WEST PALM BCH. FL 33417**

**SOMERSET K201
WEST PALM BEACH FL 33417-2636
US**

3. Date Incorporated or Qualified **08/23/1976** 3a. Date of Last Report **01/24/1995**

2. Principal Place of Business

2a. Mailing Address

21

26

4. FEI Number

59-6589564

Applied For

Not Applicable

Suite, Apt. #, etc

Suite, Apt. #, etc.

5. Certificate of Status Desired

☐

**\$8.75 Additional
Fee Required**

City & State

City & State

6. Election Campaign Financing
Trust Fund Contribution

☐

**\$5.00 May Be
Added to Fees**

Zip

Country

Zip

Country

24

25

29

30

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes ☐ Yes ☒ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**TAUBEN, HARRY
SOMERSET K201
WEST PALM BEACH FL 33417**

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

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE	PD	<input type="checkbox"/> DELETE
NAME	TAUBEN, HARRY	
STREET ADDRESS	SOMERSET K201	
CITY-ST-ZIP	W PALM BCH. FL	
TITLE	VD	<input type="checkbox"/> DELETE
NAME	DUBIN, IDA	
STREET ADDRESS	NORTHAMPTON L223	
CITY-ST-ZIP	W PALM BCH. FL	
TITLE	VD	<input type="checkbox"/> DELETE
NAME	OSUR, BETTY	
STREET ADDRESS	WALTHAM B APT 39	
CITY-ST-ZIP	W PALM BCH. FL	
TITLE	TD	<input type="checkbox"/> DELETE
NAME	MARTEL, MIRIAM	
STREET ADDRESS	NORTHAMPTON A12	
CITY-ST-ZIP	WEST PALM BEACH FL	
TITLE	SD	<input type="checkbox"/> DELETE
NAME	PLASKON, JEANNE	
STREET ADDRESS	8878 N. SUNSET DRIVE	
CITY-ST-ZIP	LAKE PARK FL	
TITLE	T	<input type="checkbox"/> DELETE
NAME	NADLER, GLORIA	
STREET ADDRESS	CHATHAM V-425	
CITY-ST-ZIP	WEST PALM BEACH FL	

1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY-ST-ZIP	
2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY-ST-ZIP	
3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY-ST-ZIP	
4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY-ST-ZIP	
5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY-ST-ZIP	
6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 CITY-ST-ZIP	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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.

SIGNATURE:

HARRY TAUBEN
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/22/96
Date

407-653-1915
Daytime Phone #

CR2E037 (12/95)