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95 MAY -1 PM 5:20

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

CORPORATION
ANNUAL REPORT
1995



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

DOCUMENT # 736688 (3)
1. Corporation Name
FARNHAM "N" CONDOMINIUM ASSOCIATION, INC.

Principal Place of Business Mailing Address
FARNHAM N 4018/C.V.E. FARNHAM N 4018/C.V.E.
DEERFIELD BEACH FL 33442 DEERFIELD BEACH FL 33442

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified 08/26/1976	3a. Date of Last Report 05/01/1994
4. FEI Number 59-1921670	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
7. Nonprofit with IRS 501(c)(3) Tax Exempt Status ☐	\$68.75 Supplemental Fee Not Required
8. This corporation has liability for intangible tax under C. 100.022, Florida Statutes ☐ Yes ☒ No	

2. Principal Place of Business 21 Suite, Apt. #, etc. 22 City & State 23 Zip 24	2a. Mailing Address 25 Suite, Apt. #, etc. 26 City & State 27 Zip 28	29	30
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9. Name and Address of Current Registered Agent

CONDOMINIUM OWNERS ORGANIZATION OF CENTURY
VILLAGE EAST INC.
3501 WEST DRIVE
DEERFIELD BEACH FL 33442-2085

10. Name and Address of New Registered Agent

81 Name	85 Zip Code
82 Street Address (P.O. Box Number is Not Acceptable)	
83	
84 City	FL

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, 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 607.0505, Florida Statutes.

SIGNATURE

Signature: Typed or printed name of registered agent and the applicant

NOTE: Registered Agent Signature required when recertifying

DATE

12. OFFICERS AND DIRECTORS

TITLE	PD
NAME	MILLER, JOHN
STREET ADDRESS	4018 FARNHAM N
CITY ST ZIP	DEERFIELD BEACH FL
TITLE	VD
NAME	SASS, FANNIE
STREET ADDRESS	3014 FARNHAM N
CITY ST ZIP	DEERFIELD BEACH FL
TITLE	DT
NAME	TUDOR, FRANCES
STREET ADDRESS	2008 FARNHAM N
CITY ST ZIP	DEERFIELD BEACH FL
TITLE	DS
NAME	YACAVONE, ANNE
STREET ADDRESS	2016 FARNHAM N
CITY ST ZIP	DEERFIELD BEACH FL
TITLE	
NAME	
STREET ADDRESS	
CITY ST ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY ST ZIP	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE	☐ Change ☐ Addition
12 NAME	300001474628
13 STREET ADDRESS	-05/04/95--01001--001
14 CITY ST ZIP	**32760.00 ****130.00
21 TITLE	☒ Change ☐ Addition
22 NAME	VD
23 STREET ADDRESS	FLORENCE RECHT
24 CITY ST ZIP	3008 FARNHAM N
31 TITLE	☐ Change ☐ Addition
32 NAME	
33 STREET ADDRESS	
34 CITY ST ZIP	
41 TITLE	☐ Change ☐ Addition
42 NAME	
43 STREET ADDRESS	
44 CITY ST ZIP	
51 TITLE	☐ Change ☐ Addition
52 NAME	
53 STREET ADDRESS	
54 CITY ST ZIP	
61 TITLE	☐ Change ☐ Addition
62 NAME	
63 STREET ADDRESS	
64 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 110.07(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:

SIGNATURE AND TYPE OR PRINTED NAME OF SIGNER OF AGENT OR DIRECTOR

JOHN H. MILLER

1-17-95 305-368-7153

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