

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
May 03, 2006 8:00 am
Secretary of State

04-27-2006 90417 001 15,496.25

DOCUMENT # 739027 1. Entity Name OAKRIDGE "U" CONDOMINIUM ASSOCIATION, INC.					
Principal Place of Business CONDO OWNERS ORG. OF CENTURY VILLAGE E 3501 WEST DRIVE DEERFIELD BCH, FL 33442-2085 US				Mailing Address CONDO OWNERS ORG. OF CENTURY VILLAGE E 3501 WEST DRIVE DEERFIELD BCH, FL 33442-2085 US	
2. Principal Place of Business		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State			
Zip		Country		Zip	
Country		Country		Country	
4. FEI Number 59-1901658				Applied For <input type="checkbox"/> Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/>				\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent CONDOMINIUM OWNERS ORGANIZATION CENTURY 3501 WEST DRIVE DEERFIELD BEACH, FL 33442-2085				7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City <div style="display: flex; justify-content: space-between;"> FL Zip Code </div>	
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. I am familiar with, and accept the obligations of registered agent.					
SIGNATURE _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reconstituting)</small>					
Filing Fee is \$61.25 Due by May 1, 2006		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>		\$5.00 May Be Added to Fees	
Make check payable to Florida Department of State					
10. OFFICERS AND DIRECTORS					
TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input checked="" type="checkbox"/> Delete	
PD	SCHWARTZ, GERTRUDE	4092 OAKRIDGE U	DEERFIELD BEACH, FL 33442		
D	LIEBERMAN, NIKKI	2081 OAKRIDGE U	DEERFIELD BEACH, FL	<input checked="" type="checkbox"/> Delete	
VD	LIEBERMAN, NIKKI	2081 OAKRIDGE U	DEERFIELD BEACH, FL 33442	<input checked="" type="checkbox"/> Delete	
T	SCHWARTZAPPEL, SIDNEY	3089 OAKRIDGE U	DEERFIELD BEACH, FL 33442	<input type="checkbox"/> Delete	
D	GOLDBERG, DONALD	OAKRIDGE U-1089	DEERFIELD BEACH, FL	<input checked="" type="checkbox"/> Delete	
D	HEITZLER, WILLIAM	OAKRIDGE U-4086	DEERFIELD BEACH, FL	<input checked="" type="checkbox"/> Delete	
11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10					
TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition	
VD	NIKKI LIEBERMAN	2081 Oakridge U	Deerfield Beach FL 33442		
FVD	MARVIN KELLER	2088 Oakridge U	D.B.H 33442	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition	
VD	JOAN SCHWARTZAPPEL	3089 Oakridge U	D.B.H 33442	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition	
S	ABBY HEITZLER	4086 Oakridge U	D.B.H 33442	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition	
D	RUTH FERBER	3093 Oakridge U	D.B.H 33442	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition	
D	ARNOLD PAGLIA	1081 Oakridge U	D.B.H 33442	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition	
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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: <u>Nikki Lieberman</u>				Date: <u>4/1/06</u>	
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR <u>NIKKI LIEBERMAN</u>				Daytime Phone # <u>(954) 428-3533</u>	

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