

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 740408

1. Entity Name

PRESCOTT "H" CONDOMINIUM ASSOCIATION, INC.

FILED
Jul 12, 2000 8:00 am
Secretary of State

04-25-2000 90324 001 15,006.25

Principal Place of Business

C/O PRESCOTT H-160
DEERFIELD BCH FL 33442

Mailing Address

C/O PRESCOTT H-160
DEERFIELD BCH FL 33442

2. Principal Place of Business

Suite, Apt. #, etc.

City & State

Zip

Country

3. Mailing Address

Suite, Apt. #, etc.

City & State

Zip

Country



DO NOT WRITE IN THIS SPACE

4. FEI Number
59-1964637

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

CONDOMINIUM ORGANIZATION OF CENTURY VILL
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

FL

Zip Code

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 Rudolph M. Kodicek

Secretary

Feb. 2, 2000

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

(NOTE: Registered Agent signature required when re-instating)

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	PDT	☐ Delete
NAME	MANDEL, ROSALIE	
STREET ADDRESS	PRESCOTT H-152	
CITY-ST-ZIP	DEERFIELD BEACH FL 33442	
TITLE	VD	☐ Delete
NAME	OFFICINA CARL	
STREET ADDRESS	PRESCOTT H 159	
CITY-ST-ZIP	DEERFIELD BCH FL	
TITLE	SD	☐ Delete
NAME	KODICEK, RUDDOLPH	
STREET ADDRESS	PRESCOTT H 160	
CITY-ST-ZIP	DEERFIELD BCH FL	
TITLE	D	☐ Delete
NAME	DINELLI, FELIX	
STREET ADDRESS	PRESCOTT H-149	
CITY-ST-ZIP	DEERFIELD BEACH FL 33442	
TITLE	D	☐ Delete
NAME	HOLLYWOOD, MADELINE	
STREET ADDRESS	PRESCOTT H 161	
CITY-ST-ZIP	DEERFIELD BEACH FL 33442	
TITLE	D	☐ Delete
NAME	GRECO, JOSEPH	
STREET ADDRESS	PRESCOTT H 164	
CITY-ST-ZIP	DEERFIELD BEACH FL 33442	

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	☐ Change ☐ Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	☐ Change ☐ Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	☐ Change ☐ Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	☐ Change ☐ Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
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 AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (9/99)