

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
May 25, 2005 8:00 am
Secretary of State

05-05-2005 90139 001 15,373.75

DOCUMENT # 740410 1. Entity Name PRESCOTT "J" CONDOMINIUM ASSOCIATION, INC.					
Principal Place of Business C/O CONDOMINIUM OWNERS ORGANIZATION OF CEN 3501 WEST DRIVE DEERFIELD BEACH, FL 33442-2085			Mailing Address C/O CONDOMINIUM OWNERS ORGANIZATION OF CEN 3501 WEST DRIVE DEERFIELD BEACH, FL 33442-2085		
2. Principal Place of Business Suite, Apt. #, etc.		3. Mailing Address Suite, Apt. #, etc.		66013140 	
City & State Zip Country		City & State Zip Country		4. FEI Number 59-1989804 Applied For ☐ Not Applicable	
5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required				03192005 Chg-NP CR2E037 (10/03)	
6. Name and Address of Current Registered Agent CONDOMINIUM OWNERS ORGANIZATION OF 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 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. I am familiar with, and accept the obligations of registered agent.					
SIGNATURE _____ Signature, typed or printed name of registered agent and State if applicable (NOTE: Registered Agent signature required when reappointing) DATE _____					
Filing Fee is \$81.25 Due by May 1, 2005		9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees		Make check payable to Florida Department of State	
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE NAME STREET ADDRESS CITY - ST - ZIP	PD SIDER, W M PRESCOTT J 198 DEERFIELD BCH. FL.,	☐ Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	VD MAX BOSELL 190 Prescott + J Deerfield Beach. FL 33442	☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	TS DELLINGER, BILL 410 S. POWERLINE RD DEERFIELD BCH, FL 33442	☐ Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP		☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	VD KATZ, BETTY PRESCOTT J 198 DEERFIELD BEACH, FL 33442	☒ Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	D COHEN, HAROLD 192 PRESCOTT J DEERFIELD BEACH, FL 33442	☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D BRIGELL, ALAN PRESCOTT J 187 DEERFIELD BEACH, FL 33442	☒ Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP		☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP		☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP		☐ Change ☐ Addition
12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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>William Sider</u> <u>WILLIAM SIDER</u> <u>4/4/05</u> <u>(954) 428-7022</u> SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #					