

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
May 22, 2008 8:00 am
Secretary of State

05-08-2008 90101 001 15,496.25

DOCUMENT # 740413

1. Entity Name
PRESCOTT "M" CONDOMINIUM ASSOCIATION, INC.



Principal Place of Business
**CONDO OWNERS ORG. OF CENTURY VILLAGE E
3501 WEST DRIVE
DEERFIELD BEACH, FL 33442-2085**

Mailing Address
**CONDO OWNERS ORG. OF CENTURY VILLAGE E
3501 WEST DRIVE
DEERFIELD BEACH, FL 33442-2085**

66011703



2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

02062008

Chg-NP

CR2E037 (12/06)

City & State

City & State

4. FEI Number
59-1999004

Applied For
Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**CONDOMINIUM OWNERS ORGANIZATION CENTURY VI
LLAGE EAST, INC.
3501 WEST DRIVE
DEERFIELD BEACH, FL 33442-2085**

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 title if applicable.

(NOTE: Registered Agent signature required when reappointing)

DATE

**Filing Fee is \$61.25
Due by May 1, 2008**

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 PD
NAME PERRY, SUSAN
STREET ADDRESS 252 PRESCOTT M
CITY-ST-ZIP DEERFIELD BEACH, FL 33442 ☐ Delete

TITLE VPP
NAME THOMAS TOMLINSON
STREET ADDRESS 241 PRESCOTT 'M'
CITY-ST-ZIP D.B. H 33442 ☐ Change ☒ Addition

TITLE VD
NAME CUMMINGS, ROBERT
STREET ADDRESS 249 PRESCOTT M
CITY-ST-ZIP DEERFIELD BEACH, FL 33442 ☒ Delete

TITLE TD
NAME LOUIS YODICE
STREET ADDRESS 248 PRESCOTT 'M'
CITY-ST-ZIP D.B. H 33442 ☐ Change ☒ Addition

TITLE TD
NAME FOLDMAN, ROBERT
STREET ADDRESS 246 PRESCOTT M
CITY-ST-ZIP DEERFIELD BEACH, FL 33442 ☒ Delete

TITLE D
NAME ROBERT Feldman
STREET ADDRESS 246 PRESCOTT 'M'
CITY-ST-ZIP D.B. H 33442 ☐ Change ☒ Addition

TITLE VD
NAME TOMLINSON, ? REV
STREET ADDRESS 241 PRESCOTT M
CITY-ST-ZIP DEERFIELD BEACH, FL 33442 ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE SD
NAME ENMAN, DALE
STREET ADDRESS 258 PRESCOTT M
CITY-ST-ZIP 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

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:

Thomas Tomlinson
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/27/08 (954) 892-9311
Date Daytime Phone #

THOMAS TOMLINSON