2000 UNIFORM BUSINESS REPORT (UBR)

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FILED DOCUMENT # 740422 Jul 12, 2000 8:00 am Secretary of State 1. Entity Name TILFORD "D" CONDOMINIUM ASSOCIATION, INC. 04-25-2000 90324 001 15,006.25 Principal Place of Business Mailing Address AI WALLACE MGT TILFORD D-65 DEERFIELD BEACH FL 33442 P.O. BOX 273832 BOCA RATON FL 33427-3832 2. Principal Place of Susiness Malling Address DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Suite, Apt. #, etc. City & State 4. FEI Number Applied For · City & State 59-1955116 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired П Fee Required 7. Name and Address of New Registered Agent 5. Name and Address of Current Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) CONDOMINIUM OWNERS ORGANIZATION CENTURY VILLAGE EAST 3501 WEST DRIVE City Zip Code FI DEERFIELD BEACH FL 33442-2085 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 DATE Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) 9. Election Campaign Financing Make Check Payable to **FILE NOW:** \$5.00 May Be Trust Fund Contribution. Added to Fees Department of State FEE IS \$61.25 ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 OFFICERS AND DIRECTORS 10. 11. Dalate ☐ Change YD TIRE TITLE Louis KLEIN, JULIAN NAME Bermani NAME CRZE037 ВЧ STREET ADDRESS tilfora D STREET ADDRESS TILFORD D 83 Beach, FL 33447 CITY-ST-ZIP CITY-ST-ZIP DEERFIELD BEACH FL ☐ Addition TITLE Delete TITLE Elgort, Doris **ELGORT, DORIS** NAME NAME STREET ADDRESS STREET ADDRESS TILFORD D 81 Deerfield Beach, FL CITY-ST-ZIE CITY-ST-ZIP **DEERFIELD BEACH FL 33442** OTT **Y**Change ☐ Addition ☐ Daleta TITLE TIPLE Fresco, Lee Tilpord 0 65 FRESCO, LEE NAME NAME STREET ADDRESS STREET ADDRESS TILFORD, D-65 Delifield Beach , FL 33442 CITY-ST-ZIP CITY-ST-ZIP DEERFIELD BEACH FL M Addition Delete ППЕ ☐ Change TITLE Battaglia Demetrio NAME NAME Tilford D STREET ADDRESS STREET ADDRESS Deerfield Beach ifi CITY-ST-20P CITY+ST-ZIP 33443 ☐ Addition DILE Change ☐ Oelete TATLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Addition TITLE ☐ Change TITLE ☐ Delete NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 12. Thereby certify that the information supplied with this filling does not qualify for the exemption stated in Section 1(9.07(3)(!), 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.

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