

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 # 740423					
1. Entity Name TILFORD "E" CONDOMINIUM ASSOCIATION, INC.					
Principal Place of Business C/O COOCVE 3501 WEST DRIVE DEERFIELD BEACH, FL 33442-2085			Mailing Address C/O COOCVE 3501 WEST DRIVE DEERFIELD BEACH, FL 33442-2085		
2. Principal Place of Business		3. Mailing Address		03222005 Chg-NP CR2E037 (10/03)	
Suite, Apt. #, etc.		Suite, Apt. #, etc.		4. FEI Number 59-1899539	
City & State		City & State		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 CONDOMINIUM OWNERS ORGANIZATION OF CENTURY VILLAGE EAST 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 title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE _____					
Piling 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	P	☒ Delete	TITLE	PD	☐ Change ☒ Addition
NAME	RAINER, JERRY		NAME	BERNADETTE VALLEE	
STREET ADDRESS	98 TILFORD E		STREET ADDRESS	100 TILFORD E	
CITY-ST-ZIP	DEERFIELD BEACH, FL 33442		CITY-ST-ZIP	DEERFIELD BEACH, FL 33442	
TITLE	V	☒ Delete	TITLE	V	☐ Change ☒ Addition
NAME	DUBITSKY, HARIET		NAME	LILIAN KAUFMAN	
STREET ADDRESS	92 TILFORD E		STREET ADDRESS	85 TILFORD E	
CITY-ST-ZIP	DEERFIELD BEACH, FL 33442		CITY-ST-ZIP	D.B. FL 33442	
TITLE	S	☒ Delete	TITLE	S	☐ Change ☒ Addition
NAME	ORLIN, JANET		NAME	RUTH PERELMUTTER	
STREET ADDRESS	6138 ALOMA LANE		STREET ADDRESS	104 TILFORD E	
CITY-ST-ZIP	BOCA RATON, FL 33433		CITY-ST-ZIP	D.B. FL 33442	
TITLE	T	☐ Delete	TITLE	D	☐ Change ☒ Addition
NAME	STRATKAUSKAS, VINCENT		NAME	ED GALLON	
STREET ADDRESS	98 TILFORD E		STREET ADDRESS	93 TILFORD E	
CITY-ST-ZIP	DEERFIELD BEACH, FL 33442		CITY-ST-ZIP	D.B. FL 33442	
TITLE	D	☒ Delete	TITLE		☐ Change ☐ Addition
NAME	ADLER, HARRY		NAME		
STREET ADDRESS	91 TILFORD E		STREET ADDRESS		
CITY-ST-ZIP	DEERFIELD BEACH, FL 33442		CITY-ST-ZIP		
TITLE	D	☒ Delete	TITLE		☐ Change ☐ Addition
NAME	SHAHRIARI, ALI		NAME		
STREET ADDRESS	103 TILFORD E		STREET ADDRESS		
CITY-ST-ZIP	DEERFIELD BEACH, FL 33442		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, such as all other like empowered.					
SIGNATURE: 		3-08-05		(954) 574-0539	
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNED OFFICER OR DIRECTOR		Date		Daytime Phone #	

VINCENT STRATKAUSKAS