

# 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**May 10, 2007 8:00 am**  
**Secretary of State**

04-27-2007 90235 001 15,496.25

<b>DOCUMENT # 740424</b> 1. Entity Name <b>TILFORD "F" CONDOMINIUM ASSOCIATION, INC.</b>					
Principal Place of Business <b>CONDO OWNERS ORG. OF CENTURY VILLAGE E 3501 WEST DRIVE DEERFIELD BEACH, FL 33442-2085</b>			Mailing Address <b>CONDO OWNERS ORG. OF CENTURY VILLAGE E 3501 WEST DRIVE DEERFIELD BEACH, FL 33442-2085</b>		
2. Principal Place of Business - No P.O. Box # Suite, Apt. #, etc. City & State Zip Country			3. Mailing Address Suite, Apt. #, etc. City & State Zip Country		
4. FEI Number <b>59-1812733</b>			Applied For <input type="checkbox"/> Not Applicable		
5. Certificate of Status Desired <input type="checkbox"/>			\$8.75 Additional Fee Required		
6. Name and Address of Current Registered Agent <b>CONDOMINIUM ORGANIZATION OF CENTURY VLLG 3501 WEST DRIVE DEERFIELD BEACH, FL 33442-2085</b>			7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City <b>FL</b> 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 _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reconstituting)</small>					
<b>Filing Fee is \$61.25 Due by May 1, 2007</b>		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>		<b>\$5.00 May Be Added to Fees</b>	
<b>Make check payable to Florida Department of State</b>					
<b>10. OFFICERS AND DIRECTORS</b>					
TITLE	PD <b>DUMOULIN, MARCEL</b>	<input type="checkbox"/> Delete			
NAME	106 TILFORD F				
STREET ADDRESS	DEERFIELD BEACH, FL 33442				
CITY-ST-ZIP					
TITLE	VT	<input checked="" type="checkbox"/> Delete			
NAME	FARBER, FAY				
STREET ADDRESS	128 TILFORD F				
CITY-ST-ZIP	DEERFIELD BEACH, FL 33442				
TITLE	S	<input type="checkbox"/> Delete			
NAME	KLEIN, LEAH				
STREET ADDRESS	118 TILFORD F				
CITY-ST-ZIP	DEERFIELD BEACH, FL 33442				
TITLE	T	<input type="checkbox"/> Delete			
NAME	ALLEN, BARBARA				
STREET ADDRESS	108 TILFORD F				
CITY-ST-ZIP	DEERFIELD BEACH, FL 33442				
TITLE	D	<input type="checkbox"/> Delete			
NAME	KLEIN, HENRY				
STREET ADDRESS	118 TILFORD F				
CITY-ST-ZIP	DEERFIELD BEACH, FL 33442				
TITLE	D	<input type="checkbox"/> Delete			
NAME	SCHULTZ, ARTHUR				
STREET ADDRESS	120 TILFORD F				
CITY-ST-ZIP	DEERFIELD BEACH, FL 33442				
<b>11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10</b>					
TITLE	VB	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition			
NAME	FAY FARBER				
STREET ADDRESS	128 TILFORD F				
CITY-ST-ZIP	D.A. FL 33442				
TITLE	D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition			
NAME	JACQUELINE DUMOULIN				
STREET ADDRESS	106 TILFORD F				
CITY-ST-ZIP	D.A. FL 33442				
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.					
<b>SIGNATURE:</b> <u>Marcel Dumoulin</u> <b>MARCEL DUMOULIN 4/5/07 (954) 428-2777</b> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>					

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