

# 2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

DOCUMENT # 740433

1. Entity Name

TILFORD "O" CONDOMINIUM ASSOCIATION, INC.



FILED

04 APR 27 PM 5:06

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

66413212



MOORE CR2E037 (11/03)

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

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

59-1922067

Applied For

Not Applicable

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 ORGANIZATI-OF VILL EAST  
3501 WEST DRIVE  
DEERFIELD BCH. 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 reinstating)

DATE

FILE NOW: FEE IS \$61.25  
Due By May 1, 2004

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 DV ☐ Delete  
NAME MANN, MAGDA  
STREET ADDRESS 320 TILFORD O  
CITY-ST-ZIP DEERFIELD BCH FL 33442

TITLE ☒ Change ☐ Addition  
NAME 100034613981  
STREET ADDRESS 04/29/04--01020--001 \*\*15006.25  
CITY-ST-ZIP

TITLE TS ☐ Delete  
NAME SORENSEN, THELMA  
STREET ADDRESS 324 TILFORD O  
CITY-ST-ZIP DEERFIELD BCH FL 33442

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

TITLE D ☒ Delete  
NAME SAVITSKY, JACK  
STREET ADDRESS 306 TILFORD O  
CITY-ST-ZIP DEERFIELD BCH. FL 33442

TITLE VSD ☐ Change ☒ Addition  
NAME PAESTIDGE, JOHN  
STREET ADDRESS 324 TILFORD O  
CITY-ST-ZIP DEERFIELD BCH, FL. 33442

TITLE D ☒ Delete  
NAME DAVIS, MIKE  
STREET ADDRESS 310 TILFORD O  
CITY-ST-ZIP DEERFIELD BEACH FL

TITLE D ☐ Change ☒ Addition  
NAME MANN, MAGDA  
STREET ADDRESS 320 TILFORD O  
CITY-ST-ZIP DEERFIELD BCH, FL. 33442

TITLE PD ☐ Delete  
NAME BECKER, GEORGE  
STREET ADDRESS 308 TILFORD O  
CITY-ST-ZIP DEERFIELD BCH FL 33442

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

TITLE D ☒ Delete  
NAME COOK, JULIE  
STREET ADDRESS 314 TILFORD O  
CITY-ST-ZIP DEERFIELD BEACH FL 33442

TITLE D ☐ Change ☒ Addition  
NAME METCALF, PATRICIA  
STREET ADDRESS 315 TILFORD O  
CITY-ST-ZIP DEERFIELD BEACH, FL 33442

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, with all other like empowered.

SIGNATURE:

George Becker GEORGE BECKER

2/9/04

(954) 421-8072

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #