2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# 740817

Entity Name: TILFORD "T" CONDOMINIUM ASSOCIATION, INC.

FILED Apr 23, 2003 Secretary of State

Current Principal Place of Business:				New Principal Place of Business:			
TILFORD T #425 DEERFIELD BEACH, FL 33442							
Current Mailing Address:				New Mailing Address:			
AJ WALLACE MGT P.O. BOX 273632 BOCA RATON, FL 33427				W. RICHARD CORCORAN 425 TILFORD "T" DEERFIELD BEACH, FL 33442			
FEI Number: 59-1921462 FEI Number Applied For () FEI Nu			FEI Nun	mber Not Applicable () Certificate of Status Desired ()			
Name and	Address of Cu	rrent Registered Agent:	Name and	Address of Ne	ew Regis	tered Agent:	
CONDOMINIUM OWNERS ORGANIZATION CENTURY VI LLAGE EAST,INC. 3501 WEST DRIVE DEERFIELD BEACH, FL 334422085 US							
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:							
Electronic Signature of Registered Agent				Date			
OFFICERS AND DIRECTORS:				ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:			
Title: Name: Address: City-St-Zip:	PD () C OTERO, MAGALI 425 TILFORD T DEERFIELD BEA	Delete CH, FL 33442		Title: Name: Address: City-St-Zip:	PD (X) CORCORAN, WI 425 TILFORD T DEERFIELD BEA		RES
Title: Name: Address: City-St-Zip:	DV () E KENT, AMMIE 431 TILFORD T DEERFIELD BEA	CH, FL 33442		Title: Name: Address: City-St-Zip:	()(Change ()	Addition
Title: Name: Address: City-St-Zip:	TD () E SOTO, IDA 424 TILFORD T DEERFIELD BEA	CH, FL 33442		Title: Name: Address: City-St-Zip:	() (Change ()	Addition
Title: Name: Address: City-St-Zip:	SD () E YURMAN, ETHEL TILFORD T 426 DEERFIELD BCH			Title: Name: Address: City-St-Zip:	() (Change ()	Addition
Title: Name: Address: City-St-Zip:	D () E LAFRENIERE, LII 434 TILFORD T DEERFIELD BCH			Title: Name: Address: City-St-Zip:	() (Change ()	Addition
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I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: WILLIAM RICHARD CORCORAN PRES 04/23/2003