
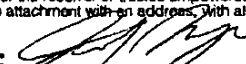


**2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

**FILED**  
**May 03, 2006 8:00 am**  
**Secretary of State**

04-27-2006 90417 001 15,496.25

<b>DOCUMENT # 740828</b>			
1. Entity Name VENTNOR "G" CONDOMINIUM ASSOCIATION, INC.			
Principal Place of Business CONDO OWNERS ORG. OF CENTURY VILLAGE E 3501 WEST DRIVE DEERFIELD BEACH, FL 33442-2085		Mailing Address CONDO OWNERS ORG. OF CENTURY VILLAGE E 3501 WEST DRIVE 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
02142008		Chg-NP CR2E037 (11/05)	
4. FEI Number 59-1887212		Applied For Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent CONDO OWNERS ORG. OF CENTURY VILLAGE E 3501 WEST DRIVE DEERFIELD BEACH, FL 33442-2085		7. Name and Address of New Registered Agent	
Name		Name	
Street Address (P.O. Box Number is Not Acceptable)		Street Address (P.O. Box Number is Not Acceptable)	
City		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 _____		DATE _____	
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when restructuring)			
Filing Fee is \$81.25 Due by May 1, 2006		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$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 NAME STREET ADDRESS CITY-ST-ZIP	DP KAMINOFF, LEO 2016 VENTNOR G DEERFIELD BEACH, FL 33442	<input checked="" type="checkbox"/> Delete	TITLE PD NAME GERRY MARGOLIS STREET ADDRESS 3011 VENTNOR G CITY-ST-ZIP D.B.H. 33442
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DV MARGOLIES, JERRY 3011 VENTNOR G DEERFIELD BEACH, FL 33442	<input checked="" type="checkbox"/> Delete	TITLE DS NAME DORIS FISCHER STREET ADDRESS 4012 VENTNOR G CITY-ST-ZIP D.B.H. 33442
TITLE NAME STREET ADDRESS CITY-ST-ZIP	2V FISCHER, PORIS 4012 VENTNOR G DEERFIELD BEACH, FL 33442	<input checked="" type="checkbox"/> Delete	TITLE T NAME SHIRLEY WEISS STREET ADDRESS 4008 VENTNOR G CITY-ST-ZIP D.B.H. 33442
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D BROTMAN, EUGENE 3004 VENTNOR G DEERFIELD BEACH, FL 33442	<input type="checkbox"/> Delete	TITLE S NAME ESTHER KAMINOFF STREET ADDRESS 2016 VENTNOR G CITY-ST-ZIP D.B.H. 33442
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D GREER, ROBERT 3012 VENTNOR G DEERFIELD BEACH, FL 33442	<input checked="" type="checkbox"/> Delete	TITLE D NAME Carmello LOMAGNO STREET ADDRESS 1002 VENTNOR G CITY-ST-ZIP D.B.H. 33442
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T WEISS, SHIRLEY 4008 VENTNOR G DEERFIELD BEACH, FL 33442	<input checked="" type="checkbox"/> Delete	TITLE V NAME Betty Raiman STREET ADDRESS 4003 VENTNOR G CITY-ST-ZIP D.B.H. 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.			
SIGNATURE: 		2.2.06 (954) 426-9517	
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		Date Daytime Phone #	
GERRY MARGOLIES			