

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 # 740834 1. Entity Name VENTNOR "M" 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		66018933 																																																																																											
Suite, Apt. #, etc.		Suite, Apt. #, etc.		03262005 Chg-NP CR2E037 (10/03)																																																																																											
City & State		City & State		4. FEI Number 59-1945005																																																																																											
Zip		Zip		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 ORG. CENTURY VILLAGE EAST, INC. 3501 WEST DRIVE DEERFIELD BEACH, 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 reappointing)																																																																																															
Filing 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 <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width: 15%;">TITLE</td> <td style="width: 65%;">P STOLOW, CHARLOTTE</td> <td style="width: 20%; text-align: right;">☐ Delete</td> </tr> <tr> <td>STREET ADDRESS</td> <td colspan="2">209 VENTNOR M</td> </tr> <tr> <td>CITY - ST - ZIP</td> <td colspan="2">DEERFIELD BEACH, FL 33442</td> </tr> <tr> <td>TITLE</td> <td>DV PRIVITERA, JOSEHINE</td> <td style="text-align: right;">☐ Delete</td> </tr> <tr> <td>STREET ADDRESS</td> <td colspan="2">212 VENTNOR M</td> </tr> <tr> <td>CITY - ST - ZIP</td> <td colspan="2">DEERFIELD BEACH, FL 33442</td> </tr> <tr> <td>TITLE</td> <td>TD HUBERMAN, HARTLEY</td> <td style="text-align: right;">☐ Delete</td> </tr> <tr> <td>STREET ADDRESS</td> <td colspan="2">203 VENTNOR M</td> </tr> <tr> <td>CITY - ST - ZIP</td> <td colspan="2">DEERFIELD BEACH, FL 33442</td> </tr> <tr> <td>TITLE</td> <td>SD CHAMBERLIN, MOIRA</td> <td style="text-align: right;">☐ Delete</td> </tr> <tr> <td>STREET ADDRESS</td> <td colspan="2">218 VENTNOR M</td> </tr> <tr> <td>CITY - ST - ZIP</td> <td colspan="2">DEERFIELD BEACH, FL 33442</td> </tr> <tr> <td>TITLE</td> <td>D FINK, ROSEA</td> <td style="text-align: right;">☐ Delete</td> </tr> <tr> <td>STREET ADDRESS</td> <td colspan="2">208 VENTNOR M</td> </tr> <tr> <td>CITY - ST - ZIP</td> <td colspan="2">DEERFIELD BEACH, FL 33442</td> </tr> <tr> <td>TITLE</td> <td>D WEINSTEIN, MARK</td> <td style="text-align: right;">☐ Delete</td> </tr> <tr> <td>STREET ADDRESS</td> <td colspan="2">219 VENTNOR M</td> </tr> <tr> <td>CITY - ST - ZIP</td> <td colspan="2">DEERFIELD BEACH, FL 33442</td> </tr> </table> 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width: 15%;">TITLE</td> <td style="width: 65%;">NAME</td> <td style="width: 20%; text-align: right;">☐ Change ☐ Addition</td> </tr> <tr> <td>STREET ADDRESS</td> <td colspan="2"></td> </tr> <tr> <td>CITY - ST - ZIP</td> <td colspan="2"></td> </tr> <tr> <td>TITLE</td> <td>NAME</td> <td style="text-align: right;">☐ Change ☐ Addition</td> </tr> <tr> <td>STREET ADDRESS</td> <td colspan="2"></td> </tr> <tr> <td>CITY - ST - ZIP</td> <td colspan="2"></td> </tr> <tr> <td>TITLE</td> <td>NAME</td> <td style="text-align: right;">☐ Change ☐ Addition</td> </tr> <tr> <td>STREET ADDRESS</td> <td colspan="2"></td> </tr> <tr> <td>CITY - ST - ZIP</td> <td colspan="2"></td> </tr> <tr> <td>TITLE</td> <td>NAME</td> <td style="text-align: right;">☐ Change ☐ Addition</td> </tr> <tr> <td>STREET ADDRESS</td> <td colspan="2"></td> </tr> <tr> <td>CITY - ST - ZIP</td> <td colspan="2"></td> </tr> </table>						TITLE	P STOLOW, CHARLOTTE	☐ Delete	STREET ADDRESS	209 VENTNOR M		CITY - ST - ZIP	DEERFIELD BEACH, FL 33442		TITLE	DV PRIVITERA, JOSEHINE	☐ Delete	STREET ADDRESS	212 VENTNOR M		CITY - ST - ZIP	DEERFIELD BEACH, FL 33442		TITLE	TD HUBERMAN, HARTLEY	☐ Delete	STREET ADDRESS	203 VENTNOR M		CITY - ST - ZIP	DEERFIELD BEACH, FL 33442		TITLE	SD CHAMBERLIN, MOIRA	☐ Delete	STREET ADDRESS	218 VENTNOR M		CITY - ST - ZIP	DEERFIELD BEACH, FL 33442		TITLE	D FINK, ROSEA	☐ Delete	STREET ADDRESS	208 VENTNOR M		CITY - ST - ZIP	DEERFIELD BEACH, FL 33442		TITLE	D WEINSTEIN, MARK	☐ Delete	STREET ADDRESS	219 VENTNOR M		CITY - ST - ZIP	DEERFIELD BEACH, FL 33442		TITLE	NAME	☐ Change ☐ Addition	STREET ADDRESS			CITY - ST - ZIP			TITLE	NAME	☐ Change ☐ Addition	STREET ADDRESS			CITY - ST - ZIP			TITLE	NAME	☐ Change ☐ Addition	STREET ADDRESS			CITY - ST - ZIP			TITLE	NAME	☐ Change ☐ Addition	STREET ADDRESS			CITY - ST - ZIP		
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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: 3/30/05 (954) 425-7026 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR																																																																																															
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