2001 UNIFORM BUSINESS REPORT (UBR) Apr 05, 2001 8:00 am Secretary of State **DOCUMENT # 742749** 1. Entity Name CANTERBURY F CONDOMINIUM ASSOCIATION, INC. 04-05-2001 90096 020 ****61.25 Mailing Address Principal Place of Business CANTERBURY F-135 **CANTERBURY F-135** CENTURY VILLAGE CENTURY VILLAGE WEST PALM BEACH FL 33417 WEST PALM BEACH FL 33417 3. Mailing Address 2. Principal Place of Business Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE 4. FEI Number Applied For City & State City & State 59-1795672 Not Applicable Country \$8.75 Additional Zip Country 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) JULIUS MILLER **CANTERBURY F-135** CENTURY VILLAGE Zip Code City WEST PALM BEACH FL 33417 FL 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. **SIGNATURE** DATE (NOTE: Registered Agent signature required when reinstating) Signature, typed or printed name of registered agent and title if applicable. 9. Election Campaign Financing **\$5.00** May Be Make Check Payable to **FILE NOW:** Trust Fund Contribution. Department of State Added to Fees FEE IS \$61.25 ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 OFFICERS AND DIRECTORS 11. 10. ☐ Change Addition DP □ Delete TITLE TITLE NAME MILLER, JULIUS NAME STREET ADDRESS STREET ADDRESS 135 CANTERBURY F CITY-ST-ZIP CITY-ST-ZIP WEST PALM BEACH FL 33417 Change Addition TITLE ☐ Delete TITLE NAME ZUKERMAN, BERNARD NAME STREET ADDRESS STREET ADDRESS 142 CANTERBURY F CITY-ST-ZIP CITY-ST-ZIP west palm beach fl Change ☐ Addition ☐ Delete TITLE TITLE MANZI, AIDA NAME NAME STREET ADDRESS STREET ADDRESS 127 CANTERBURY F CITY-ST-ZIP CITY-ST-ZIP WEST PALM BEACH FL ■ Addition ☐ Delete TITLE Change TITLE LEWIS, ERMA NAME STREET ADDRESS STREET ADDRESS 143 CANTERBURY F CITY-ST-ZIP CITY-ST-ZIP W. PALM BEACH FL

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.

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