

FILE NOW: FILING FEE IS \$61.25

FILED

Mar 24 1997 8:00am
Secretary of StateNONPROFIT
CORPORATION
ANNUAL REPORT
1997FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS**DOCUMENT # 746020 (7)**
1. Corporation Name
CENTURY VILLAGE EAST SYMPHONY ORCHESTRA, INC.Principal Place of Business
**AUGUST, BERNARD
BERKSHIRE, E. 1074
DEERFIELD BEACH FL 33442
US**
Mailing Address
**AUGUST, BERNARD
BERKSHIRE E. 1074
DEERFIELD BEACH FL 33442-3358
US**3. Date Incorporated or Qualified
02/20/1979
3a. Date of Last Report
02/20/19962. Principal Place of Business
21
2a. Mailing Address
26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22
City & State**27**
City & State**23**
Zip Country**28**
Zip Country4. FEI Number
59-1914920
Applied For
Not Applicable5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**6. Election Campaign Financing
Trust Fund Contribution ☒ **\$5.00 May Be Added to Fees**8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☒ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**AUGUST, BERNARD
BERKSHIRE, E. 1074
DEERFIELD BEACH FL 33442****81** Name**82** Street Address (P.O. Box Number is Not Acceptable)**83****84** City**FL** **85** Zip Code

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE **D** ☒ DELETE
NAME **LASS, STELLA**
STREET ADDRESS **MARKHAM B 36**
CITY-ST-ZIP **DEERFIELD BEACH FL**1.1 TITLE **DIRECTOR** ☐ Change ☒ Addition
1.2 NAME **JACK POSTMAN**
1.3 STREET ADDRESS **6339 STANLEY LANE**
1.4 CITY-ST-ZIP **Deerfield Beach FL**TITLE **M** ☐ DELETE
NAME **COUSIN, RUTH**
STREET ADDRESS **VENTNOR O 4047**
CITY-ST-ZIP **DEERFIELD BEACH FL**2.1 TITLE ☐ Change ☐ Addition
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIPTITLE **TD** ☐ DELETE
NAME **AUGUST, BERNARD**
STREET ADDRESS **BERSHIRE E 1074**
CITY-ST-ZIP **DEERFIELD BEACH FL**3.1 TITLE ☐ Change ☐ Addition
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIPTITLE **VD** ☐ DELETE
NAME **KATZMAN, RUTH**
STREET ADDRESS **OAKRIDGE U 2089**
CITY-ST-ZIP **DEERFIELD BEACH FL**4.1 TITLE ☐ Change ☐ Addition
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIPTITLE **SD** ☒ DELETE
NAME **BROWNSTEIN, FRED A**
STREET ADDRESS **VENTNOR L. 188**
CITY-ST-ZIP **DEERFIELD BEACH FL**5.1 TITLE **S D** ☒ Change ☒ Addition
5.2 NAME **ADELE LAMPERT**
5.3 STREET ADDRESS **2074 S W 17th Drive**
5.4 CITY-ST-ZIP **Deerfield Beach FL**TITLE **PD** ☐ DELETE
NAME **ROSENSTROCK, PHILIP**
STREET ADDRESS **780 N.E., 199TH**
CITY-ST-ZIP **N. MIAMI BEACH FL**6.1 TITLE ☐ Change ☐ Addition
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

14. I do 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: **Bernard August** **BERNARD AUGUST**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

954-427-1372
Daytime Phone # 0042976

CR2E037 (9/96)