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NONPROFIT CORPORATION annual report

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #

STREET ADDRESS

CITY-ST-ZIP

746058

FANSHAW AT CENTURY VILLAGE CONDOMINIUM ASSOCIATI ON, INC.

Principal Place of Business Mailing Address FANSHAW D 157 FANSHAW D 157 **BOCA RATON FL 33434 BOCA RATON FL 33434** 3a. Date of Last Report 04/12/1996 3. Date Incorporated or Qualified 02/26/1979 4: FEI Number 2a. Mailing Address Applied For 2. Principal Place of Business 59-2106707 Not Applicable 562 Fanshaw N Suite, Apt. #, etc. \$8.75 Additional Suite, Apt. #, etc. 5. Certificate of Status Desired Fee Required 27 Boca Raton, FL 33434 22 City & State 6. Election Campaign Financing City & State \$5.00 May Be ___ Added to Fees Trust Fund Contribution 33434 Zip 23 28 Palm Beach Country Country 8. This corporation has liability for intangible tax under s. 199.032, Zip Yes No Florida Statutes 30 24 25 29 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name LIPSON, HERMAN 82 Street Address (P.O. Box Number is Not Acceptable) **FANSHAW K434** 63 **BOCA RATON FL 33434** Zip Code 84 City 85 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 applications of, Section 617.0503, Florida Statutes. SIGNATURE (NOTE: Registered Agent signature required when reinstating) t and title if applicable ADDITIONS/CHANGES TO OFFICE S AND DIRECTORS IN 12 OFFICERS AND DIRECTORS 13. 96/6) 12 X Change Addition DELETE TITLE 1.1 TITLE Secretary FALK, ROSELYN 1.2 NAME NAME erry Ronner 38 Fanshaw K FANSHAW K 462 1.3 STREET ADDRESS STREET ADDRESS **BOCA RATON, FL 00000** 1.4 CITY-ST-ZIP Boca Raton, FL 33434 City-St-ZiP Change Addition DELETE TITLE 2.1 TITLE LIPSON, HERMAN 2.2 NAME NAME FANSHAW K434 STREET ADDRESS 2.3 STREET ADDRESS **BOCA RATON, FL 00000** 2. 4 City-St-ZIP CITY-ST-ZIP Y Change Addition X DELETE TITLE 3.1 TITLE MAUTNER, CLARA 3.2 NAME NAME FANSHAW F227 3.3 STREET ADDRESS STREET ADDRESS **BOCA RATON, FL 00000** 3.4. CITY-SY-ZIP CITY - ST - ZIP Change ☐ Addition DELETE 4.1 TITLE Treasurer EHRLICH, JANET 4. 2 NAME NAME Hortense Klein **FANSHAW D 157** 4.3 STREET ADDRESS STREET ADDRESS 562 Fanshaw N **BOCA RATON, FL 00000** CITY - ST - ZIP 4.4 CITY-ST-ZIP Boca Raton, FL 33434 Change ☐ Addition □ DELETE 5 1 T(T) F TITLE SHARKIN, ABRAHAM 5.2 NAME NAME **FANSHAW N550** 5.3 STREET ADDRESS STREET ADDRESS **BOCA RATON FL** CITY-ST-ZIP 5.4 CITY-ST-ZIP DELETE Change Addition 6.1 TITLE TITLE 6.2 NAME 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. & EQUIRED SIGNATURE:

FILED

Feb 03 1997 8:00am

Secretary of State

Daytime Phone # 0078844