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NONPROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS

1996

DOCUMENT # 754441

(4)

CENTURY MEN'S CLUB OF BOCA RATON, INC.

| Principal | Place of | Business | |
|-----------|----------|----------|--|
| | | | |

Mailing Address



| 13146 LYON BOCA RATO | | 13146 LYONS RD. BOCA RATON FL 3349 | 34 | | | | · |
|-------------------------|---|---------------------------------------|---------------------|-----------------------------|---|--------------------------------------|---|
| | | | | | 3. Date Incorporated or Qualified 10/02/1980 | 3a. Date of L 02/13 | ast Report 3/1995 |
| 2. Principal P | lace of Business 196 Lyon's RD. | 2a. Mailing Address | Lyons | 00 | 4. FEI Number | _ | Applied For |
| Suite, Apt | | 26 19 296 Suite, Apt. #, etc. | LYONS | ND | 59-2039313 | | Not Applicable |
| 22 | | 27 | | | 5. Certificate of Status Desired | | .75 Additional ee Required |
| City & Stat | € | City & State | | | Election Campaign Financing Trust Fund Contribution | | 5.00 May Be dded to Fees |
| Zip | Country | Zıp | Countr | у | 8. This corporation has liability for in: | | |
| 24 | 25 | 29 | 30 | | | Yes No | |
| | 9. Name and Address of Curren | t Registered Agent | | -, | 10. Name and Address of New Re- | gistered Agent | |
| | | | 8 | Name | | | |
| , | HERBERT | | 8: | 2 Street As | idress (P.O. Box Number is Not Acceptable |) | |
| | W C 101 | | | | | | |
| BOCA F | IATON FL 33434 | | 8: | 3 | | | |
| | | | 8- | 7 / | | FL 85 | Zip Code |
| or registe | to the provisions of Sections 617,0502 red agent, or both, in the State of Floric ith, and accept the obligations of, Secti | ia. Such change was authon, | zea by the cor | named corp poration's by | poration submits this statement for the purpoper of directors. Thereby accept the appoint | ose of changing ntment as registe | its registered office ered agent. I am |
| SIGNATURE | Signature, typed or pricted name of registered agent | and the fareholder /N | IOTE Basistanasi An | set en alura zon | ured when reinstaling; | DATE | |
| 12. | OFFICERS AND | | 13. | ii i sigriature requ | ADDITIONS/CHANGES TO OFFIC | | OTORS IN 12 |
| TITLE | TD | DELETE | 1.1 TITLE | | | Chan | |
| NAME | ROTH, HERBERT | | 1.2 NAME | | | | , [.) |
| STHEET ADDRESS | FANSHAW C-101 | | 1.3 STREE | T ADDRESS | | | [8] |
| CITY-ST-ZIP | BOCA RATON FL | | 1.4 CITY- | | | | 2 |
| TITEF | P | DELETE | 2 1 TITLE | | ρ | ⊡ Chan | ige Addition 5 |
| NAME | NEWBERGER, MORTON | | 2 2 NAME | | WEISS, LOVIS 102 SVEFOLK C | | |
| STREET ADDRESS | EXETER D 1061 | | 2 3 STREE | T ADDRESS | 102 SURFOLK C | | |
| CITY - ST - ZIP | BOCA RATON FL | | 2 4 CITY | - ST - ZIP | BOCA RATON, FL | | |
| TITLE | SD | DELETE | 3 1 TITLE | | | Chan | ige Addition |
| NAME | SCHNAPP, JOSEPH | | 3.2 NAME | • | | | |
| STREET ADDRESS | 52 SUFFOLK | | 3 3 STREE | I ADDRESS | | | |
| CITY - ST - ZIP | BOCA RATON FL | | 3 4 CITY | -ST-ZIP | | | |
| TITLE | VP | □ DELETE | 4 1 TITLE | | VP | ™ Chan | ge Addition |
| NAME | WEISS, LOU | | 4 2 NAMI | [| CARMEL, NATHAN 2005 10 3037 NEWCAST | • | |
| STREET ADDRESS | 102 SUFFOLK C. | | 4 3 STREE | T ADDRESS | 2016 3037 NEWCASTI | ie B | |
| CITY - ST - ZIP | BOCA RATON FL | | 4.4 CITY - | | BOCA RATON, +L | | |
| TITLE | FSD | DELETE | 5 1 TITLE | | FSD | Chan- | ge 🔲 Addition |
| NAME | LYNETTE, ABIE | | 5.2 NAME | | SUSSMAN, NIAT 341 PORSET I BOCA RATON, FL. | | |
| STREET ADDRESS | 141 SUFFOLK DR | | 5 3 STREE | T ADDRESS | 341 PORSET T | | |
| CITY - ST - ZIP | BOCA RATON FL | | 5.4 C/TY- | ST-ZIP | BOCA RATION, FL. | | |
| TITLE | VP | DELETE | 6 1 TITLE | İ | ,, | Chan | ge 🔲 Addition |
| NAME | ZUCKER, MILTON | | 6 2 NAME | | | | |
| STREET ADDRESS | 4026 NEW CASTLE B | | 6 3 STREE | LADDRESS | | | |
| CITY-ST-ZIP | BOCA RATON FL | ith this files is valentarily for | 6 4 CITY - | ST-ZIP | | | |
| LE LOW DATA | w computest the intermetion curoling w | ath this thing is valuatorly for | niched and de- | aller on team or | for the eventuation exchange Continuation Co. | DOMESTIC CO. | |

I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k). 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: _

Address Roth
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR
HERBERT ROTH