


SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 17, 1997
AMOUNT DUE ON OR BEFORE 9/17/97: \$61.25 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$236.25).

FILED
Aug 19 1997 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Sandra B. Matham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **754441** (4)
1. Corporation Name

CENTURY MEN'S CLUB OF BOCA RATON, INC.

Principal Place of Business

Mailing Address

19296 LYONS RD.
BOCA RATON FL 33434
US

19296 LYONS RD.
BOCA RATON FL 33434
US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified **10/02/1980** 3a. Date of Last Report **01/29/1996**

4. FEI Number **59-2039313** Applied For ☐ Not Applicable ☐

5. 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 owes or has paid the current year Intangible Personal Property Tax due June 30. ☐ Yes ☐ No

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip Country

28 Zip Country

24 25 29 30 9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**ROTH, HERBERT
FANSHAW C 101
BOCA RATON FL 33434**

81 Name

82 Street Address (P.O. Box, Apt., etc.)

83 *****61.25**

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 **TD** ☒ DELETE
NAME **ROTH, HERBERT**
STREET ADDRESS **FANSHAW C-101**
CITY-ST-ZIP **BOCA RATON FL**

1.1 TITLE **D** ☐ Change ☒ Addition
1.2 NAME **MARTIN SAVEADOFF**
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP **1020 NEWCASTLE A BOCA RATON, FL 33434**

TITLE **P** ☐ DELETE
NAME **WEISS, LOUIS**
STREET ADDRESS **102 SUFFOLK C**
CITY-ST-ZIP **BOCA RATON FL**

2.1 TITLE **PRES.** ☐ Change ☐ Addition
2.2 NAME **WEISS LOUIS**
2.3 STREET ADDRESS **102 SUFFOLK C**
2.4 CITY-ST-ZIP **BOCA RATON, FL. 33434**

TITLE **SD** ☐ DELETE
NAME **SCHNAPP, JOSEPH**
STREET ADDRESS **52 SUFFOLK**
CITY-ST-ZIP **BOCA RATON FL**

3.1 TITLE **D** ☐ Change ☒ Addition
3.2 NAME **IRVING ROBIN**
3.3 STREET ADDRESS **2053 ENTER C**
3.4 CITY-ST-ZIP **BOCA RATON, FL 33434**

TITLE **VP** ☐ DELETE
NAME **CARMEL, NATHAN**
STREET ADDRESS **3037 NEWCASTLE B**
CITY-ST-ZIP **BOCA RATON FL**

4.1 TITLE **VICE PRES** ☐ Change ☐ Addition
4.2 NAME **CARMEL NATHAN**
4.3 STREET ADDRESS **3037 NEWCASTLE B**
4.4 CITY-ST-ZIP **BOCA RATON, FL. 33434**

TITLE **FSD** ☐ DELETE
NAME **SUSSMAN, NAT**
STREET ADDRESS **341 DORSET I**
CITY-ST-ZIP **BOCA RATON FL**

5.1 TITLE **F.S.D** ☐ Change ☐ Addition
5.2 NAME **SUSSMAN NAT**
5.3 STREET ADDRESS **341 DORSET I**
5.4 CITY-ST-ZIP **BOCA RATON, FL. 33434**

TITLE **VP** ☐ DELETE
NAME **ZUCKER, MILTON**
STREET ADDRESS **4026 NEW CASTLE B**
CITY-ST-ZIP **BOCA RATON FL**

6.1 TITLE **BEN ABRAMS** ☐ Change ☒ Addition
6.2 NAME **4037 NEWCASTLE B**
6.3 STREET ADDRESS **BOCA RATON, FL. 33434**
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

SIGNATURE REQUIRED

CR2E037 (4/97)