

# 2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

**FILED**  
**Apr 01, 2004 8:00 am**  
**Secretary of State**

04-01-2004 90013 037 \*\*\*\*61.25

**DOCUMENT # N00000002482**

1. Entity Name

COVENTRY D CONDOMINIUM ASSOCIATION, INC.



Principal Place of Business

73 COVENTRY D CONDOMINIUM  
CENTURY VILLAGE  
WEST PALM BEACH FL 33417-2134

Mailing Address

73 COVENTRY D CONDOMINIUM  
CENTURY VILLAGE  
WEST PALM BEACH FL 33417-2134

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country



MOORE

CR2E037 (11/03)

4. FEI Number

59-1815173

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75** Additional  
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

TARTAKOFF, MAURICE  
73 COVENTRY D CONDOMINIUM  
CENTURY VILLAGE  
WEST PALM BEACH FL 33417-2134

Name

Street Address (P.O. Box Number is Not Acceptable)

City

**FL**

Zip Code

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW: FEE IS \$61.25**  
**Due By May 1, 2004**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$5.00** May Be  
Added to Fees

**Make Check Payable to**  
**Florida Department of State**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE PD  
NAME TARTAKOFF, MAURICE ☐ Delete  
STREET ADDRESS 73 COVENTRY D CONDOMINIUM, CENTURY VILLAGE  
CITY-ST-ZIP WEST PALM BEACH FL 33417-2134

TITLE D ☐ Change ☒ Addition  
NAME REIS, ISABEL  
STREET ADDRESS 80 COVENTRY D  
CITY-ST-ZIP WEST PALM BEACH, FL 33417

TITLE SD  
NAME TRICKA, FLORENCE ☐ Delete  
STREET ADDRESS 96 COVENTRY D CONDOMINIUM, CENTURY VILLAGE  
CITY-ST-ZIP WEST PALM BEACH FL 33417-2134

TITLE VP ☐ Change ☒ Addition  
NAME SMITH, JOHN  
STREET ADDRESS 90 COVENTRY D  
CITY-ST-ZIP WEST PALM BEACH, FL 33417

TITLE TD  
NAME MICHELSON, ESTHER ☐ Delete  
STREET ADDRESS 88 COVENTRY D CONDOMINIUM, CENTURY VILLAGE  
CITY-ST-ZIP WEST PALM BEACH FL 33417-2134

TITLE ☐ Change ☒ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE D  
NAME PLUTA, ILENE ☐ Delete  
STREET ADDRESS 76 COVENTRY D CONDOMINIUM, CENTURY VILLAGE  
CITY-ST-ZIP WEST PALM BEACH FL 33417-2134

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE D  
NAME TARTAKOFF, SIPPORAH ☐ Delete  
STREET ADDRESS 73 COVENTRY D CONDOMINIUM  
CITY-ST-ZIP WEST PALM BEACH FL 33417-2134

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE D  
NAME APRILE, CONNIE ☐ Delete  
STREET ADDRESS 82 COVENTRY D CONDINIUM, CENTURY VILLAGE  
CITY-ST-ZIP WEST PALM BEACH FL 33417-2134

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

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.

SIGNATURE:

*Maurice Tartakoff*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

(Pres) 3/29/04 561-687-0985  
Date Daytime Phone #