## 2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

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DOCUMENT # N06017 03-14-2005 90111 019 \*\*\*\*61.25 NEW HAMPTON AT CENTURY VILLAGE CONDOMINIUM #II ASSOCIATION, INC. Principal Place of Business Mailing Address 13460 SW 10 STREET 13460 SW 10 STREET 50026082 **SUITE 101** SUITE 101 PEMBROKE PINES, FL 33027 PEMBROKE PINES, FL 33027 HS US 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 01102005 Chg-NP CR2E037 (10/03) City & State City & State Applied For 4. FEI Number 59-2766916 Not Applicable Zip Country Zin Country \$8.75 Additional Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name DAVIS, CHARLES W. 13460 SW 10TH ST Street Address (P.O. Box Number is Not Acceptable) STE 101 PEMBROKE PINES, FL 33027 City 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 (NOTE: Registered Agent signature required when reinstating) Make check payable to Filing Fee is \$61.25 9. Election Campaign Financing \$5.00 May Be Florida Department of State Trust Fund Contribution. Due by May 1, 2005 Added to Fees . OFFICERS AND DIRECTORS 10. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 TITLE, The Co District SCHWARTZ, JOSEPH TITLE COLUMN Kolman, Geneva NAME -NAME 300 SW 134 WAY E-413 STREET ADDRESS 101 SW 132 WAY, J-417 STREET ADDRESS CITY-ST-ZIP PEMBROKE PINES, FL 33027 CITY-ST-ZIP Pembroke Pines, FL 33027  $\overline{\mathsf{DV}}$ Delete TITLE TITLE ☐ Change **M** Addition NAME: BARLÓW, ANN NAME -Glauber, Philip-400 SW 134 WAY F-214 400 SW 134 Way STREET ADDRESS STREET ADDRESS PEMBROKE PINES, FL 33027 CITY - ST- 7IP CITY-ST-7IP Pembroke Pines, TITLE ρÝ TITLE ☐ Delete ☐ Change **Addition** Little, Mindy 101 SW 132 Way J-412 SCHRIEBER, GERI NAME NAME 13250 SW 4 COURT G-417 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP PEMBROKE PINES, FL 33027 CITY-ST-ZIP Pembroke Pines. TITLE \_\_\_ ☐ Delete TITLE ☐ Change ☐ Addition ZUSMER, CHARLOTTE NAME NAME STREET ADDRESS 251 SW 132 WAY H-418 STREET ADDRESS CITY-ST-ZIP PEMBROKE PINES, FL 33027 CITY-ST-ZIP Change ☐ Addition TITLE ☐ Delete TITLE KOLMAN, GENEVA NAME NAME STREET ADDRESS 300 SW 134 WAY, #E-413 STREET ADDRESS CITY-ST-ZIP" PEMBROKE PINES, FL 33027 CITY-ST-ZIP 🖂 Delete TITLE TITLE ☐ Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 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 attachmen

SIGNATURE:

05 Date Daytime Phone #