# 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

4/2

**FILED**
**May 11, 2007 8:00 am**
**Secretary of State**
04-20-2007 90202 014 ****61.25

DOCUMENT # N06019

1. Entity Name
NEW HAMPTON AT CENTURY VILLAGE CONDOMINIUM #III ASSOCIATION, INC.

| Principal Place of Business | Mailing Address |
|---|---|
| 13460 SW 10 STREET<br>SUITE 101<br>PEMBROKE PINES, FL 33027 US | 13460 SW 10 STREET<br>SUITE 101<br>PEMBROKE PINES, FL 33027 US |

03292007 Chg-NP CR2E037 (12/06)

| 2. Principal Place of Business - No P.O. Box # | 3. Mailing Address |
|---|---|
| Suite, Apt. #, etc. | Suite, Apt. #, etc. |
| City & State | City & State |
| Zip — — Country | Zip Country |

4. FEI Number 59-2792849 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

**6. Name and Address of Current Registered Agent**

DAVIS, CHARLES W
13460 S.W. 10 ST.
SUITE 101
PEMBROKE PINES, FL 33027

**7. Name and Address of New Registered Agent**

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 Charles W Davis Reg Agt
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

**Filing Fee is $61.25**
**Due by May 1, 2007**

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 / NAME / STREET ADDRESS / CITY-ST-ZIP | DPT<br>WAXMAN, GERTRUDE<br>151 SW 134TH WAY N-205<br>PEMBROKE PINES, FL 33027 | ☐ Delete | TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP | | ☐ Change ☐ Addition |
| TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP | VP/S<br>GREEN, ETHEL<br>200 SW 132 WAY L-212<br>PEMBROKE PINES, FL 33027 | ☐ Delete | TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP | | ☐ Change ☐ Addition |
| TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP | D<br>GERALD, WEITZNER<br>13300 SW 1ST 0-209<br>PEMBROKE PINES, FL 33027 | ☑ Delete | TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP | | Change ☐ Addition |
| TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP | D<br>HERMAN, GERTUDE<br>251 SW 134 WAY M-311<br>PEMBROKE PINES, FL 33027 | ☐ Delete | TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP | | ☐ Change ☐ Addition |
| TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP | D<br>WARMBRUN, DIANA<br>13350 SW 1ST P-212<br>PEMBROKE PINES, FL 33027 | ☐ Delete | TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP | | ☐ Change ☐ Addition |
| TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP | | ☐ Delete | TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP | Director<br>Lydia Wright<br>100 SW 132way K-111<br>Pembroke Pines, FL 33027 | ☐ Change ☑ Addition |

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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:** Ethel Green VP 4/13/07