

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Feb 13, 2001 8:00 am
Secretary of State

02-13-2001 90081 031 ****61.25

0048624

DOCUMENT # N22935

1. Entity Name

CAMBRIDGE AT CENTURY VILLAGE CONDOMINIUM #1 ASSO

Principal Place of Business

Mailing Address

C/O PRIME MANAGEMENT
 15951 SW 41ST STREET
 DAVIE FL 33331
 US

C/O PRIME MANAGEMENT
 15951 SW 41ST STREET
 DAVIE FL 33331
 US

622520



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

65-0261088

Applied For

Not Applicable

Zip

Country

Zip

Country

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

SCHNITZER, STEVE
15951 SW 41ST STREET
DAVIE FL 33331

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.

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**

9. Election Campaign Financing
 Trust Fund Contribution. ☐

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

**Make Check Payable to
 Department of State**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE NAME STREET ADDRESS CITY-ST-ZIP	D LANDIS, SYLVIA 1100 S.W. 128TH TERR PEMBROKE PINES FL 33027	☒ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D GELBAND, MURIEL 901 S.E. 128TH TERRACE PEMBROKE PINES FL	☒ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T TADELMAN, HYMAN 1001 SW 128 TERRACE PEMBROKE PINES FL	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S SWICK, ROBERT 1000 SW 128 TERR PEMBROKE PINES FL 33027	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P LIEBMAN, LEON 1101 SW 128 TERRACE PEMBROKE PINES FL	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete

TITLE NAME STREET ADDRESS CITY-ST-ZIP	DIRECTOR MARVIN BARBACH 901 SW 128 TERR PEMBROKE PINES FL 33027	☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DIRECTOR MARTIN MOSKOWITZ 1100 SW 128 TERR PEMBROKE PINES FL 33027	☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DIRECTOR-TREAS. HYMAN TADELMAN 1001 SW 128 TERR. #111 PEMBROKE PINES, FL 33027	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DIRECTOR SECRETARY ROBERT SWICK 1000 S.W. 128TH TERR. #203 PEMBROKE PINES, FL 33027	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Leon Liebman, Pres. 1101 S.W. 128 Terrace PEMBROKE PINES, FL 33027	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition

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:

ROBERT SWICK

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

02/08/01 (954) 430-4694

Date

Daytime Phone #

CR2E037 (10/00)