

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

FILED
Feb 09, 2004 8:00 am
Secretary of State

02-09-2004 90019 037 ****61.25

DOCUMENT # N22935

1. Entity Name

CAMBRIDGE AT CENTURY VILLAGE CONDOMINIUM #1
ASSOCIATION, INC.



Principal Place of Business

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

Mailing Address

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

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

65-0261088

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

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. 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

TITLE NAME STREET ADDRESS CITY-ST-ZIP	D MARCUS, AUBEY 1000 SW 128 TERR PEMBROKE PINES FL 33027 ☒ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D BARBACH, MARVIN 901 SW 128 TERR PEMBROKE PINES FL 33027 ☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T TADELMAN, HYMAN 1001 SW 128 TERR PEMBROKE PINES FL ☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D MOSKOWITZ, MARTIN 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

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE NAME STREET ADDRESS CITY-ST-ZIP	D SELDA MILTON 1000 SW 128 TERR #V309 PEMBROKE PINES FL 33027 ☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

2/4/04

954 384 2410