## **FILE NOW: FILING FEE IS \$61.25**

NONPROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1998 DOCUMENT #

(5)

CENTURY VILLAGE BILLIARD AND SOCIAL CLUB, INCORP ORATED

**FILED** Jan 30 1998 8:00am Secretary of State

011/412	٠.0						Ш	
Principal Place of Business Mailing Address						£ 01011 95011 01\$11 01011 11	111	
%LEO BRENNE	8	%LEO BRENNER			3. Date Incorporated or Qualified			
SOMERSET K	211	SOMERSET K 211						
WEST PALM BI	EACH FL 33417	WEST PALM BEACH FL 33417				04/18/1990 4. FEI Number Applied For		
					NOT APPLICABLE	Not Applic		
2. Principal P	lace of Business	2a. Mailing Address				\$8.75 Additions		
21		26			5. Certificate of Status Desired			
Suite, Apt.	#, etc.	Suite, Apt. #, etc.			6. Election Campaign Financing	<b>\$5.00</b> May Be		
22		27			Trust Fund Contribution	Added to Fees		
City & State	e	City & State			7. Is this nonprofit corporation a homeowners association?			
Zip Country		Zip Country			Yes X No			
	25	<b>⊢</b> · ⊢	10 COUIT	иy	8. This corporation owes or has paid the curr	Yes X No		
24	9. Name and Address of Currer		1			Personal Property Tax due June 30. Yes No  10. Name and Address of New Registered Agent		
		3	ε	1 Name		-3		
BRENNE	ED LEO		<u> </u>	0 0	70 C D N N N N N N N N N N N N N N N N N N			
	SET K 211		*	2 Street	ddress (P.O. Box Number is Not Acceptable)			
WEST P	ALM BEACH FL 33417		[8	3				
			ε	4 City	FL	85 Zip Code	$\neg$	
11. Pursuant to the provisions of Sections 617 0502 and 617 1508. Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered.								
11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.								
SIGNATURE								
Signature, typed or printed name of registered agent and title if applicable. (NOTE: F  12. OFFICERS AND DIRECTORS			Hegistered /	gent signature	ADDITIONS/CHANGES TO OFFICERS AND	DIRECTORS IN 12		
TITLE	PD	DELETE.	1.1 TITLE P D			Change Add		
NAME	SNYDER, WILLIAM		1.2 NAM	•	[ ] ~ 3 · 0 C /V ·			
STREET ADDRESS	227 WINDSOR K			ET ADDRESS	NAYOWITZ, AL 110 WELLINGTON C			
CITY-ST-ZIP	WEST PALM BEACH FL			-ST-ZIP	W. PALL AGALH EL 32417		<b> </b>	
TITLE	VD VD	DELETE		VD	WIPALM BEACH, FL. 33417 VICE PAES, LEE POWELL	X Change	dition	
NAME	SALTZMAN, EMANUEL		2.2 NAM	_	LEE POWELL	,		
STREET ADDRESS	WINDSOR N 303		1	ET ADDRESS	a-n			
1	WEST PALM BEACH FL			-ST-ZIP	W. PARM BEACH, FL. 3341	っ		
CITY-ST-ZIP TITLE	SD SD	DELETE	3.1 TITL			Change Add	dition	
NAME	BRENNER, LEO		3,2 NAM			_ · -		
STREET ADORESS	211 SOMERSET K		1	ET ADDRESS				
CITY-ST-ZIP	WEST PALM BEACH FL		1	-ST-ZIP				
TITLE	D	DELETE		VD.	VICE PRES.	Change  Add	dition	
NAME	GABER, JACK		4, 2 NAN	·	LEVIK, TED	<i>,</i> • —	ļ	
STREET ADDRESS	147 WELLINGTON H			ET ADDRESS	242 CAMDEN J		- 1	
CITY-ST-ZIP	W. PALM BEACH FL			-ST-ZIP	W. PALM BEACH, FC. 33417	_	i	
TITLE	TD	☐ DELETE	5.1 TITLE	-	DIRECTOR	✓ Change	dition	
NAME	KOLIKOW, ALEX		5,2 NAME		SNY DEA, WILLIAM			
STREET ADDRESS	484 WELLINGTON K	Ro Co		ET ADDRESS	WARRAK K		İ	
CITY-ST-ZIP	W. PALM BEACH FL		5.4 CITY		W. PALM BEACH FL 3341	7		
TITLE	200 C C C C C C C C C C C C C C C C C C	☐ DELETE		TD	W. PALM BEACH, FL 3341: TREASURER	Change Add	dition	
NAME		<del>_</del>	6.2 NAM		KOLIKOW, ALEX		1	
STREET ADDRESS				ET ADDRESS	484 WELLINGTON K			
					W. PALM BEACH, FL 33 417 ad in Section 119.07(3)(i), Florida Statutes, I further cer			
14. I berehy c	ertify that the information supplied w	ith this filing does not qualify for	the exem	notion state	ed in Section 119.07(3)(i). Florida Statutes. I further cer	tify that the informat	tion	

Indicated on this annual report or supplied with this illing does not qualify for the exemption stated in Section 119.07(3)(), Florida Statutes. Interfer certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.