## 2011 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT

FILED Jul 06, 2011 DOCUMENT# N39602 Secretary of State

Entity Name: CENTURY WOODS HOMEOWNERS' ASSOCIATION INC.

**Current Principal Place of Business: New Principal Place of Business:** 

P. O. BOX 3023 521 CEDAREDGE DRIVE **CENTURY WOODS CENTURY WOODS** 

NEW SMYRNA BEACH, FL 321703023 US NEW SMYRNA BEACH, FL 32168 US

**Current Mailing Address: New Mailing Address:** 

P. O. BOX 3023 521 CEDAREDGE DRIVE

**CENTURY WOODS** NEW SMYRNA BEACH, FL 32168

NEW SMYRNA BEACH, FL 321703023 US

FEI Number: 59-3037758 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

ANCONA, PETER T TREAS. WILLIAMS, ERIKA TREAS. 1104 PLOVER PLACE 519 CURLEW CIRCLE **CENTURY WOODS** CENTURY WOODS

NEW SMYRNA BEACH, FL 32168 US NEW SMYRNA BEACH, FL 32168 US

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: ERIKA WILLIAMS 07/06/2011

> Electronic Signature of Registered Agent Date

## **OFFICERS AND DIRECTORS:**

KUZMA, THEODORE L PRES. Name: 521 CEDAREDGE DRIVE Address: City-St-Zip: NEW SMYRNA BEACH, FL 32168

Title: VICE

Name: STAPLES, STEVEN M VICE Address: 603 TURNSTONE TRACE City-St-Zip: NEW SMYRNA BEACH, FL 32168

Title: **TREA** 

WILLIAMS, ERIKA TREAS. Name: Address: 519 CURLEW CIRCLE

City-St-Zip: NEW SMYRNA BEACH, FL 32168

Title: SEC

Name: KERNS, SANDRA J SECR Address: 527 CEDAREDGE DRIVE

City-St-Zip: NEW SMYRNA BEACH, FL 32168

Title: DIRE

HOLMES, THERESA D AT LAR. Name: 517 CURLEW CIRCLE Address:

City-St-Zip: NEW SMYRNA BEACH, FL 32168

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with all other like empowered.

SIGNATURE: ERIKA WILLIAMS **TREA** 07/06/2011