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NONPROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

Secretary of State

DIVISION OF CORPORATIONS

1996

DOCUMENT #

1. Corporation Name

N94000001807 (6)

THE STRATFORD "K" CONDOMINIUM ASSOCIATION AT CEN TURY VILLAGE, INC.

Mailing Address Principal Place of Business 141 STRATFORD "K" 141 STRATFORD "K" W PALM BEACH FL 33417 W PALM BEACH FL 33417 3a. Date of Last Report 3. Date Incorporated or Qualified 05/01/1995 04/11/1994 Applied For 4. FF1 Number 2a. Mailing Address 2. Principal Place of Business Not Applicable 59-1551571 26 \$8.75 Additional 21 Suite, Apt. #, etc. П 5. Certificate of Status Desired Suite, Apt. #, etc. Fee Required 27 22 \$5.00 May Be 6. Election Campaign Financing City & State City & State Added to Fees Trust Fund Contribution 28 8. This corporation has liability for intangible tax under s. 199.032, 23 Country Ζip Country Yes No Zio Florida Statutes 30 29 10. Name and Address of New Registered Agent 25 24 9. Name and Address of Current Registered Agent 81 Name Street Address (P.O. Box Number is Not Acceptable) MCCLOSKEY, WILLIAM 3700 GEORGIA AVE. **B3** W PALM BEAHC FL 33405 85 Zip Code 84 City 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. (NOTE: Registered Agent signature required when reinstating) Signature, typed or printed name of registered agent and title I applicable ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. OFFICERS AND DIRECTORS Addition Change 12. 1 1 TITLE DELETE TITLE **CR2E037** 1.2 NAME SAPENOFF, HENRY NAME 1.3 STREET ADDRESS 141 STRATFORD "K" STREET ADDRESS 1.4 CITY - ST - ZIP W PALM BEACH FL 33417 LILLIAN SILVER STEAN Change CITY-ST-ZIP DELETE 21 TITLE V 7 TITLE 139 STRATICKY K 22 NAME ENGLANDER, HENRY NAME 2 3 STREET ADDRESS W PHLM BLINCH FL 33419

WILL PAR DIA) SChange Addition 142 STRATFORD K STREET ADDRESS 2. 4 CITY-ST-ZIP W PALM BEACH FL 33417 PAYE BARDIN CITY - ST - ZIP DELETE 31 TITLE 5 7 TITLE SD 134 STRATFORN K 32 NAME BARDIN, RAYE NAME MUDRY ENGLANDER SChange Addition 3.3 STREET ADDRESS 139 STRATFORD K STREET ADDRESS 3 4. CITY - ST - ZIP W PALM BEACH FL 33417 CITY - ST - ZIP 4.1 TITLE TO DELETE TITLE 142 STANTFORD K 4. 2 NAME ROSEN, SOPHIE NAME 43 STREET ADDRESS W. PALM BEACH FL 33417 146 STRATFORD "K" STREET ADDRESS 4.4 CITY - ST - ZIP W PALM BEACH FL 33417 CITY-ST-ZIP DELETE 51 Title TITLE 5.2 NAME NAME 5.3 STREET ADDRESS STREET ADDRESS

14. Ido hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k). Florida Statutes. I further 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. Date | Date | Dating Phone |

5 4 CITY - ST - ZIP

6.3 STREET ADDRESS

61 TITLE

62 NAME

CITY-ST-ZIP

STREET ADDRESS

TiTi F

NAME

HE in OR DIRECTOR HEHRY SAPENOFF

DELETE

Change

☐ Addition