FILED

2003 NOT-FOR-PROFIT CORPORATION **UNIFORM BUSINESS REPORT (UBR)**

Apr 15, 2003 8:00 am Secretary of State DOCUMENT # N9400001807 04-15-2003 90294 001 ***857.50 1. Entity Name THE STRATFORD "K" CONDOMINIUM ASSOCIATION AT CEN TURY VILLAGE, INC. Principal Place of Business Mailing Address 146 STRATFORD K 146 STRATFORD K W PALM BEACH FL 33417 W PALM BEACH FL 33417 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. ☐ CHECK HERE IF MAKING CHANGES Applied For City & State City & State 4. FEI Number 59-1551571 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent MCCLOSKEY, WILLIAM Street Address (B.O. Box Number is NobAcceptable) .3700-GEORGIA-AVE. W PALM-BEAHC FL 33405 Centre Park West Drive#175 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 ager SIGNATURE (NOTE: Registered Agent signature required when reinstating) nd title if apolicable 9. Election Campaign Financing \$5.00 May Be Make Check Payable to FILE NOW: FEE IS \$61.25 Trust Fund Contribution. Added to Fees Florida Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 10. OFFICERS AND DIRECTORS 11. PD Delete TITLE ☐ Addition TITLE SILVER, HOWARD NAME NAME STREET ADDRESS 146 STRATFORD K STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP W PALM BEACH FL Delete Addition TITLE VP TITLE MALKA, GLORIA NAME NAME STREET ADDRESS 144 STRATFORD K STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP W PALM BCH FL ☐ Addition NAME SMUL, GERALD NAME 143 STRATFORD K STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP W PALM BCH FL w Palm neach F Delete Hopen Silver, Cath Addition TITLE TITLE SD GLIESMAN, BELLA NAME NAME 146 Stratt Ford K STREET ADDRESS 150 STRATFORD K STREET ADDRESS w Palm Beach, FL CITY-ST-ZIP CITY-ST-ZIP W PALM BCH FL TITLE RN Delete Addition BD KoTzer, Trwin MARTIN, ELLEN NAME NAME 147 Stratford K STREET ADDRESS STREET ADDRESS 141 STRATFORD K CITY-ST-ZIP vest Palw Beach r CITY-ST-ZIP WEST PALM BEACH FL 33405 TITLE Delete TITLE Change ☐ Addition BOLAND THOMAS DREISS, DEEDRE NAME NAME STREET ADDRESS 139 STRATFORD K STREET ADORESS

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 employered 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 like empowered

CITY-ST-ZIP

WEST PALM BEACH FL 33417

BEACH FL

661 683-197