FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1999



DOCUMENT # P97000024540

CENTURY SENIOR ASSOCIATION, INC.

FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

FILED Mar 02, 1999 8:00 am Secretary of State

03-02-1999 90199 011 ***150.00

Principal Place of Business Mailing Address								
6735 54TH AVENUEN 6735 54TH AVENUE N.								
LOT 89						DO NOT WRITE IN THIS SPACE		
ST. PETERSBURG FL 33709 ST. PETERSBURG FL 33709 US					- 1	3. Date Incorporated or Qualifed		
US		00				03/19/1997		ļ
2 Dringing D	lace of Business	2a, Mailing Address				4. FEI Number	Ac	plied For
ı	lace of business	— ·				59-3437468	<u> </u>	t Applicable
Suite, Apt.	# etc	Suite, Apt. #, etc.					\$8.75	
22	#, Bto.	27				5. Certificate of Status Desired	Fee Re	equired
City & State		City & State				6. Election Campaign Financing	\$5.00	May Be
23	~	28				Trust Fund Contribution	Added	
Zip	Country	Zip	Country			8. This corporation owes the current year	ır Intangible	
24	25	29 30				Personal Property Tax.	☐ Yes	□No
	9. Name and Address of Current					10. Name and Address of New Registe	red Agent	
			81	Name				
CHARLES, JOYCE				Street A	ddree	is (P.O. Box Number is Not Acceptable)	··	
6735 54TH AVENUE NORTH, LOT #89			82	SueerA	iddi C S	is (F.O. Box Number to Not Nocopiable)		
ST. F	PETERSBURG FL 33709		83					
			-				es 7in	Code
			84	City			FL 85 Zip	0006
office or r	egistered agent, or both, in the State of m familiar with, and accept the obligation of the control of the cont	of Florida. Such change was authors of, Section 607.0505, Florid	onzed by a Statutes	the corpor	ration) RV	vhen reinstating)	6-99 E	gistered
12.	OFFICERS AND		13.			ADDITIONS/CHANGES TO OFFICER	S AND DIRECTO	ORS IN 12
TITLE	DP	☐ DELE 7 E	1.1 TITLE	7	D -	AGINTIF	☐ Change	Addition
NAME	DECKER, LEO		1.2 NAME	I,	ST	URM, CHARLOTTO	v	
STREET ADDRESS	6735 54TH AVENUE NORTH, LO	OT 56	1.3 STREE	TADDRESS (673	URM, CHARLOTTE S 54+11 AVE.N. LOT 22	•	
CITY-ST-ZIP	ST. PETERSBURG FL 33709		14 CITY-S	T-ZIP	ST.	PETERSBURG, FL 339	109	
TITLE	DV	☐ DELETE	2.1 TITLE			,	☐ Change	☐ Addition
NAME	POMROY, RONALD		2.2 NAME					
STREET ADDRESS	6735 54TH AVENUE NORTH, LO	OT 10	2.3 STREE	ADDRESS		•		į
CITY-ST-ZIP	ST. PETERSBURG FL 33709		2.4 CITY-5	ST-ZIP				
TITLE	DS	☐ DELETE	3.1 TITLE				Change	☐ Addition
NAME	CHARLES, JOYCE	<i>a</i> 9	3.2 NAME	1				ļ
STREET ADDRESS	6735 54TH AVE. NORTH, LOT 6	99, ⁰	3.3 STREE	TADDRESS				}
CITY-ST-ZIP	ST. PETERSBURG FL 33709	· · · •	3.4. CITY-5	ST-ZIP				
TITLE	DST	☐ DELETE	4.1 TITLE				☐ Change	☐ Addition
NAME	HARGRAVE, CAROLYN		4. 2 NAME					
STREET ADDRESS		OT 59	4.3 STREE	TADORESS				
CITY-ST-ZIP	ST. PETERSBURG FL 33709		4.4 CITY-S	T-ZIP				
TITLE	DT	☐ DELETE	5.1 TITLE				☐ Change	☐ Addition
NAME	ZANDER, DOROTHY		5.2 NAME			·		
STREET ADDRESS	6735 54TH AVENUE, NORTH, L	OT 31	5.3 STREE	TADDRESS				
CITY-ST-ZIP	ST. PETERSBURG FL 33709		5.4 CITY-S	T-ZIP				
TITLE	D	☐ DELETÉ	6.1 TITLE				☐ Change	Addition
NAME	COX, RAYMOND		6.2 NAME			•		
STREET ADDRESS		OT 53	6.3 STREE	TADORESS				ĺ
	ST. PETERSBURG FL 33709	- · · -	6.4 CITY-S	T 7ID				

ST. PETERSBURG FL 33709 CITY-ST-ZIP 14. 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 annual report or suppliermental 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 opporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on agrattachment with an address, with all other like empowered.

SIGNATURE:

1-6-99