FILED Mar 06, 2001 8:00 am

DOCUMENT # P9700024540 1. Entity Name CENTURY SENIOR ASSOCIATION, INC.					Mar 06, 2001 8:00 am Secretary of State 03-06-2001 90338 002 ***150.00			
Principal Place of Business 6735 54TH AVENUEN OT 89 ST. PETERSBURG FL 33709		Mailing Address 6735 54TH AVENUE N. LOT 89 ST. PETERSBURG FL 33709			naneeat i			
JS	72 5070	US	•		- 	OBUR OOKO KIEK DIBEL OKKI OO	I r 14 12 1 01 1	
2. Principal Place of Business		3. Mailing Address 6135 54 TH AVE. N.						
Suite, Apt. #, etc.		Suite, Apt. #, etc. LOT 31-			DO NOT WRITE IN THIS SPACE			
City & State		ST. PETERSBURG			4. FEI Number 59-343746	>	plied For at Applicable	
Zip	Country	Zip F1.	Country 33709		5. Certificate of Status Desired	\$8.75 Add	litional	
	6. Name and Address of Current		100101		7. Name and Address of New F			
	,		Name					
	der, dorothy r 5 54th avenue North, lot #31	· · · · · · · · · · · · · · · · · · ·	Street	Street Address (P.O. Box Number is Not Acceptable)				
	PETERSBURG FL 33709					-		
			City			FL Zip Code	9	
8. The above	e named entity submits this statement for	or the purpose of changing it	s registered office	or.registere	ed agent, or both, in the State of Flo			
Tax filing	Signature, typed or printed name of registered agent oration is eligible to satisfy its Intangible requirement and elects to do so. ria on back)	FILE NOW	TE: Registered Agent sign '!!! FEE IS \$150 001 Fee will be solution.).00 \$550.00	10. Election Campaign Financing \$5.00 May Be			
11.	OFFICERS AND	DIRECTORS	12.		ADDITIONS/CHANGES TO OFF	ICERS AND DIRECTORS	3 IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DP DECKER, LEO 6735 54TH AVENUE NORTH, LO ST. PETERSBURG FL 33709	⊠ Delete PT 56	TITLE NAME STREET ADDRESS CITY-ST-ZIP	1000 6730	PETERSBURG, F	Change LoT 10 1. ₹3709	Addition	
TITLE	DV	Delete	TITLE	VP	•	⊘ Change	☐ Addition	
NAME	POMROY, RONALD		NAME	CHI	ASE, ETHEL			
STREET ADDRESS CITY-ST-ZIP	6735 54TH AVENUE NORTH, LO	OT 10	STREET ADDRESS CITY-ST-ZIP-	المراجع	75 54 th AVE.	N. LOT 64		
TITLE	ST. PETERSBURG FL 33709	⊠ Delete	TITLE	S,	PETERS BURG,	<u> </u>	☐ Addition	
NAME	CHARLES, JOYCE	Delete	NAME		GRAVE, CAROLYM			
STREET ADDRESS	6735 54TH AVE NORHT, LOT 89)	STREET ADÖRESS	1 /3 /47	5 54th AVE.	N. LOT J9		
CITY-ST-ZIP	ST. PETERSBURG FL 33709		CITY-ST-ZIP	ST.	PETERSBURG, F	<u> 1. 33709</u>		
TITLE NAME	DST HARGRAVE, CAROLYN	Delete	TITLE NAME	مريد	NKS, Lucille	: Change	☐ Addition	
STREET ADDRESS	6735 54TH AVENUE NORTH, LO	T 59	STREET ADDRESS	673	5 54th AUE. M	U.LOT 49-	- .	
CITY-ST-ZIP	ST. PETERSBURG FL 33709		CITY-ST-ZIP	51,	PEFERSBURG,	F1. 3379	9	
TITLE	DT	☐ Delete	TITLÉ		•	☐ Change	☐ Addition	
NAME	ZANDER, DOROTHY	NT 01	NAME STREET ADDRESS					
STREET ADDRESS CITY-ST-ZIP	6735 54TH AVENUE, NORTH, LO ST. PETERSBURG FL 33709	וטוע	CITY-ST-ZIP				}	
TITLE	D	⊅ Delete	TITLE	D.		Change	Addition	
NAME	COX, RAYMOND		NAME	STE	ARNS, WILLIA	n		
STREET ADDRESS	6735 54TH AVENUE NORTH, LO	T 53	STREET ADDRÉSS	6735	5 54 EL AUE. L.	·		
CITY-ST-ZIP	ST. PETERSBURG FL 33709		CITY-ST-ZIP	<u>57.</u>	· <u> </u>	-1. <i>3370</i> 4		
13. I hereby of indicated	certify that the information supplied with ton this report or supplemental report is	n this filling does not qualify for s true and accurate and that	or the exemption st my signature shall	ated in Sec have the sa	tion 119.07(3)(i), Florida Statutes. ame legal effect as if made under	I turther certify that the in path: that I am an officer	ntormation or director	

2001 UNIFORM BUSINESS REPORT (UBR)

indicated on mis report or supplemental report is true and accurate and that my signature shall have the same legal effect as it 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 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if changed, or on an attackment with an address, with all other like empowered.