

**DO NOT USE PRIOR YEAR'S FORM - PLEASE ENSURE YOU COMPLETE THIS FORM FOR YEAR 2024**

**CENTURY VILLAGE EAST, DEERFIELD BEACH, FL – BUILDING ASSOC. OFFICERS & DIRECTORS – YEAR: 2024**

**THIS FORM MUST BE COMPLETED IN FULL IN ALL AREAS – PRINT CLEARLY OR TYPE**

TODAY'S DATE: \_\_\_\_\_ AREA & BLDG. LETTER: \_\_\_\_\_ NO. OF UNITS: \_\_\_\_\_  
 PROPERTY MGMT CO: \_\_\_\_\_ PROPERTY MGR. NAME: \_\_\_\_\_ Phone #: \_\_\_\_\_

**OFFICERS & DIRECTORS ELECTED AT ANNUAL MEETING HELD ON: \_\_\_\_\_**

**CHECK BOX IF PERMANENT RESIDENT**

	OFFICER NAME	APT. #	TELEPHONE #	E-MAIL ADDRESS IS REQUIRED
<input type="checkbox"/>	PRESIDENT:			
<input type="checkbox"/>	VICE PRES.:			
<input type="checkbox"/>	TREASURER:			
<input type="checkbox"/>	SECRETARY:			

	OTHER BOARD MEMBERS	APT. #	TELEPHONE #	E-MAIL ADDRESS IS REQUIRED
<input type="checkbox"/>	1.			
<input type="checkbox"/>	2.			
<input type="checkbox"/>	3.			
<input type="checkbox"/>	4.			
<input type="checkbox"/>	5.			

**COOCVE DIRECTOR & ALTERNATE DIRECTOR:**

Garden: 1 Director ● Hi-Rises 56 & 64 Units: 3 Directors ● Hi-Rises 72 & 80 Units: 4 Directors ● Hi-Rises 96 Units: 5 Directors

	DIRECTOR/DELEGATE NAME	APT. #	TELEPHONE #	E-MAIL ADDRESS IS REQUIRED
<input type="checkbox"/>	1.			
<input type="checkbox"/>	2.			
<input type="checkbox"/>	3.			
<input type="checkbox"/>	4.			
<input type="checkbox"/>	5.			

	ALTERNATE DIRECTOR/DIRECTOR NAME	APT. #	TELEPHONE #	E-MAIL ADDRESS IS REQUIRED
<input type="checkbox"/>	1.			
<input type="checkbox"/>	2.			
<input type="checkbox"/>	3.			

SIGNATURE OF CONDOMINIUM ASSOC. PRESIDENT: \_\_\_\_\_

SIGNATURE OF CONDOMINIUM ASSOC. SECRETARY: \_\_\_\_\_

**OFFICIAL CONDOMINIUM SEAL REQUIRED**

1. SEND COMPLETED FORM TO COOCVE OFFICE, MAILBOX, OR E-MAIL: [coocve@coocve.com](mailto:coocve@coocve.com)
2. SEND COPIES TO: CVE MASTER MANAGEMENT & YOUR PROPERTY MANAGER
3. PLEASE RETAIN A COPY FOR YOUR BUILDING