

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Mar 29, 2004 8:00 am
Secretary of State

03-29-2004 90053 033 ****61.25

DOCUMENT # 716983

1. Entity Name

THE CARLYLE ASSOCIATION, INC.



Principal Place of Business

2881 N.E. 33RD COURT
 FT. LAUDERDALE FL 33306

Mailing Address

2881 N.E. 33RD COURT
 FT. LAUDERDALE FL 33306

44026310



MOORE CR2E037 (11/03)

2. Principal Place of Business

~~The Carlyle Association, Inc. 2881 NE 33rd Ct.~~
 Suite, Apt. #, etc.

3. Mailing Address

~~2881 NE 33rd Ct.~~
 Suite, Apt. #, etc.

City & State

~~Ft. Lauderdale, FL 33306~~

City & State

~~Ft. Laud. FL 33306~~

4. FEI Number

59-1303403

Applied For

Not Applicable

Zip

33306

Country

USA

Zip

33306

Country

USA

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

JACKSON, GREG
 BECKER & POLIAKOFF, PA
 3111 STIRLING ROAD
 FORT LAUDERDALE FL 33312

7. Name and Address of New Registered Agent

Name

Collodi, John

Street Address (P.O. Box Number is Not Acceptable)

2881 NE 33rd Ct., 9-E

City

Ft. Lauderdale

FL

Zip Code

33306

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 agent.

SIGNATURE

John Collodi, President

3/22/04

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW: FEE IS \$61.25
Due By May 1, 2004

9. Election Campaign Financing Trust Fund Contribution.

\$5.00 May Be Added to Fees

Make Check Payable to Florida Department of State

10. OFFICERS AND DIRECTORS

TITLE	VP	<input type="checkbox"/> Delete
NAME	STEWART, ROGER	
STREET ADDRESS	2881 NE 33RD COURT	
CITY-ST-ZIP	FORT LAUDERDALE FL 33306	
TITLE	D	<input type="checkbox"/> Delete
NAME	CANNEY, CHARLES	
STREET ADDRESS	2881 N E 33RD CT	
CITY-ST-ZIP	FT LAUDERDALE FL 33306	
TITLE	D	<input type="checkbox"/> Delete
NAME	FOSTER, STEPHEN	
STREET ADDRESS	2881 NE 33RD CT	
CITY-ST-ZIP	FORT LAUDERDALE FL 33306	
TITLE	S	<input type="checkbox"/> Delete
NAME	GOODNOW, GEOFFREY	
STREET ADDRESS	2881 NE 33RD COURT	
CITY-ST-ZIP	FT. LAUDERDALE FL 33306	
TITLE	P	<input type="checkbox"/> Delete
NAME	JACKSON, GREG	
STREET ADDRESS	2881 NE 33RD COURT	
CITY-ST-ZIP	FT LAUDERDALE FL 33306	
TITLE	T	<input type="checkbox"/> Delete
NAME	COLLODI, JOHN	
STREET ADDRESS	2881 NW 33RD CT	
CITY-ST-ZIP	FORT LAUDERDALE FL 33306	

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	VP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	Jackson, Greg	
STREET ADDRESS	2881 NE 33rd Ct., PH-B	
CITY-ST-ZIP	Ft.Lauderdale, FL 33306	
TITLE	D	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	Canney, Charles	
STREET ADDRESS	2281 NE 33rd Ct., 5-A	
CITY-ST-ZIP	Ft. Lauderdale, FL 33306	
TITLE	D	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	Smith, Jeff	
STREET ADDRESS	2281 NE 33rd Ct., 2-A	
CITY-ST-ZIP	Ft. Lauderdale, FL 33306	
TITLE	S	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	Stephen D. Foster	
STREET ADDRESS	2881 NE 33rd Ct., 8-D	
CITY-ST-ZIP	Ft. Lauderdale, FL 33306	
TITLE	P	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	Collodi, John	
STREET ADDRESS	2881 NE 33rd Ct., 9-E	
CITY-ST-ZIP	Ft. Lauderdale, FL 33306	
TITLE	T	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	Goodnow, Geoffrey	
STREET ADDRESS	2881 NE 33rd Ct., 6-B	
CITY-ST-ZIP	Ft. Lauderdale,, FL 33306	

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 empowered 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, with all other like empowered.

SIGNATURE:

John Collodi, President 3/22/04 954-565-1523

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #