


2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 08, 2004 8:00 am
Secretary of State

04-08-2004 90001 001 ****61.25

DOCUMENT # 770951 1. Entity Name CARMEL AT THE CALIFORNIA CLUB CONDOMINIUM "1" ASSOCIATION, INC.	
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Principal Place of Business C/O UNITED COMMUNITY MANAGEMENT 3300 UNIVERSITY DR., #405 CORAL SPRINGS, FL 33065 US	Mailing Address C/O UNITED COMMUNITY MANAGEMENT 3300 UNIVERSITY DR., #405 CORAL SPRINGS, FL 33065 US
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24036900



03262004 No Chg-NP CR2E037 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number 59-2352021	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent UNITED COMMUNITY MANAGEMENT CORP. 3300 UNIVERSITY DR., #405 CORAL SPRINGS, FL 33065

**DO NOT WRITE
IN THIS SPACE**

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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____
Signature, typed or printed name of registered agent and title if applicable.

Filing Fee is \$61.25 Due by May 1, 2004	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD PATRICIA KENNETT 751 NE 199TH ST APT 204 MIAMI, FL 33179
TITLE NAME STREET ADDRESS CITY-ST-ZIP	STD DICKOFF, KAREN 751 NE 199TH ST APT 201 MIAMI, FL 33179
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD KENNETT, JAMES 751 NE 199TH ST APT 204 MIAMI, FL 33179
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IN THIS SPACE**

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: *James L. Kennett* **James L. Kennett** *4/2/04* *305-652-6665*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #