2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jul 06, 2004 8:00 am
Secretary of State
07-06-2004 90007 033 ****61.25

DOCUMENT # N00000006178

1. Entity Name
CARLTON WOODS HOMEOWNER'S ASSOCIATION, INC.

Principal Place of Business	Mailing Address
165 WSR 434 WINTER SPRINGS, FL 32708	P.O BOX 915322 LONGWOOD, FL 32791-5322

2. Principal Place of Business	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Zip / Country	Zip / Country

44040000

07012004 Chg-NP CR2E037 (10/03)

4. FEI Number 59-3676240 — Applied For / Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
NATIONAL ASSOCIATION MGMT. COMP. 165 W SR 434 WINTER SPRINGS, FL 32708	Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code

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

Filing Fee is $61.25
Due by September 8, 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			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE	PD	☒ Delete	D	☐ Change ☒ Addition
NAME	DALY, KEITH L		SCHATZ, JOHN	
STREET ADDRESS	1257 REAGANS RESERVE BVLD		1244 REAGAN'S RESERVE BLVD	
CITY-ST-ZIP	APOPKA, FL 32712		APOPKA, FL. 32824	
TITLE	VPD	☒ Delete	DT	☐ Change ☒ Addition
NAME	PENA, MANNY		FONG, GUILLERMO	
STREET ADDRESS	1208 REAGANS RESERVE BLVD		1256 REAGAN'S RESERVE BLVD	
CITY-ST-ZIP	APOPKA, FL 32712		APOPKA, FL 32824	
TITLE	DS	☒ Delete	DVP	☐ Change ☒ Addition
NAME	ORTON, WILEY		HERRERA, RIGO	
STREET ADDRESS	1202 REAGANS RESERVE BLVD		1238 REAGAN'S RESERVE BLVD	
CITY-ST-ZIP	APOPKA, FL 32712			
TITLE	TD	☐ Delete	DS	☐ Change ☒ Addition
NAME	GRENCI, MICHAEL		CAMACHO, ANGELA	
STREET ADDRESS	1323 REAGANS RESERVE BLVD		1245 REAGAN'S RESERVE BLVD	
CITY-ST-ZIP	APOPKA, FL 32712		APOPKA, FL 32824	
TITLE		☐ Delete	PD	☒ Change ☐ Addition
NAME			GRENCI, MICHAEL	
STREET ADDRESS			1323 REAGANS RESERVE BLVD	
CITY-ST-ZIP			APOPKA, FL. 32712	
TITLE		☐ Delete		☐ Change ☐ Addition
NAME				
STREET ADDRESS				
CITY-ST-ZIP				

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: _____ Marc A Blum LCAM 7/1/04 407-327-5824
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #