


2006 NOT-FOR-PROFIT CORPORATION
ANNUAL REPORT

FILED
Mar 06, 2006 8:00 am
Secretary of State

03-06-2006 90004 035 ****61.25

DOCUMENT # N00000006178 1. Entity Name CARLTON WOODS HOMEOWNER'S ASSOCIATION, INC.					
Principal Place of Business 165 WSR 434 WINTER SPRINGS, FL 32708			Mailing Address P O BOX 915322 LONGWOOD, FL 32791-5322		
2. Principal Place of Business Suite, Apt. #, etc.		3. Mailing Address P.O. Box 197043			
City & State Zip		City & State Winter Springs, FL Zip 32719-7043		Country US	
4. FEI Number 59-3676240				Applied For <input type="checkbox"/> Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/>				\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent NATIONAL ASSOCIATION MGMT. COMP. 165 W SR 434 WINTER SPRINGS, FL 32708			7. Name and Address of New Registered Agent Name Palmerston LLC Street Address (P.O. Box Number is Not Acceptable) 165 W. SR 434 City Winter Springs FL Zip Code 32708		
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 <u><i>[Signature]</i></u> <small>Signature, typed or printed name of registered agent and title if applicable</small>			DATE <u>02/28/06</u> <small>(NOTE: Registered Agent signature required when reinstating)</small>		
Filing Fee is \$61.25 Due by May 1, 2006		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>		\$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 NAME STREET ADDRESS CITY-ST-ZIP	D SCHATZ, JOHN 1244 REAGANS RESERVE BLVD ORLANDO, FL 32824	<input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	DP Nunez, Gilbert 1250 Reagans Reserve Blvd. Apopka, FL 32712	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DT FONG, GUILLERMO 1256 REAGANS RESERVE BLVD ORLANDO, FL 32824	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	D Kimbley, Elizabeth 1203 Reagans Reserve Blvd. Apopka, FL 32712	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DVP HERRERA, RIGO 1238 REAGANS RESERVE BLVD ORLANDO, FL 32824	<input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	DS Grenci, Ingrid 1323 Reagans Reserve Blvd. Apopka, FL 32712	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD GRENCI, MICHAEL 1323 REAGANS RESERVE BLVD APOPKA, FL 32712	<input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	DV Camacho, Angela 1245 Reagans Reserve Blvd Apopka, FL 32712	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DS CAMACHO, ANGELA 1245 REAGANS RESERVE BLVD ORLANDO, FL 32824	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	DV Camacho, Angela 1245 Reagans Reserve Blvd Apopka, FL 32712	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DS CAMACHO, ANGELA 1245 REAGANS RESERVE BLVD ORLANDO, FL 32824	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	DV Camacho, Angela 1245 Reagans Reserve Blvd Apopka, FL 32712	<input type="checkbox"/> Change <input type="checkbox"/> Addition
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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: <u><i>[Signature]</i></u> Gilbert Nunez			DATE: <u>3/14/06</u> 407-814-2141		
<small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>			<small>DATE DAYTIME PHONE #</small>		