

# 2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N00000006178

FILED  
Jan 14, 2010  
Secretary of State

**Entity Name:** CARLTON WOODS HOMEOWNER'S ASSOCIATION, INC.

**Current Principal Place of Business:**

390 WEST STATE RD. 434  
SUITE 203  
LONGWOOD, FL 327504977

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 197043  
WINTER SPRINGS, FL 327197043

**New Mailing Address:**

FEI Number: 59-3676240

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

PALMERSTON, LLC  
390 WEST S.R. 434 STE.203  
LONGWOOD, FL 327504977 US

**Name and Address of New Registered Agent:**

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.

SIGNATURE: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

**OFFICERS AND DIRECTORS:**

Title: DST  
Name: MAYEUX, KATHY  
Address: 1251 REAGANS RESERVE BLVD  
City-St-Zip: APOPKA, FL 32712

Title: DP  
Name: CAMACHO, ANGELA  
Address: 1245 REAGANS RESERVE BLVD  
City-St-Zip: APOPKA, FL 32712

Title: DV  
Name: SCHATZ, JOHN  
Address: 1244 REAGANS RESERVE BLVD  
City-St-Zip: APOPKA, FL 32712

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with all other like empowered.

SIGNATURE: ANGELA CAMACHO

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01/14/2010

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date