

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000008617

FILED
Apr 26, 2009
Secretary of State

Entity Name: THE CARRIAGE HOMES AT CARILLON LAKES CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

5600 U.S. HIGHWAY 98 N
LAKELAND, FL 33813

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 92108
LAKELAND, FL 33804

New Mailing Address:

FEI Number: 61-1458047

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HARKINS, W.M. R
5600 US HWY 98 N
SUITE #1
LAKELAND, FL 33809 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: PD () Delete
Name: OBERG, CHERIE
Address: 5600 U.S. HWY 98 N STE. 1
City-St-Zip: LAKELAND, FL 33809

Title: TD () Delete
Name: KOHLER, WILLIAM
Address: 3879 SERENADE LN
City-St-Zip: LAKELAND, FL 33811

Title: VPD () Delete
Name: MORSE, MICHAEL R
Address: 5600 U.S HWY 98 STE 1
City-St-Zip: LAKELAND, FL 33809

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: OBERG, CHERIE
Address: 3816 SERENADE LANE
City-St-Zip: LAKELAND, FL 33811

Title: DS (X) Change () Addition
Name: O'HARA, STEVEN
Address: 3933 SERENADE LN
City-St-Zip: LAKELAND, FL 33811

Title: VPD (X) Change () Addition
Name: MORSE, MICHAEL R
Address: 3923 SERENADE LANE
City-St-Zip: LAKELAND, FL 33811

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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 an address, with all other like empowered.

SIGNATURE: CHERIE OBERG

PRES

04/26/2009

Electronic Signature of Signing Officer or Director

Date