

# **2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N21779

**FILED**  
**Apr 14, 2011**  
**Secretary of State**

**Entity Name:** CLAIMONT NEIGHBORHOOD ASSOCIATION, INC.

**Current Principal Place of Business:**

8211 W. BROWARD BLVD., SUITE PH-1  
PLANTATION, FL 33324

**New Principal Place of Business:**

**Current Mailing Address:**

8211 W. BROWARD BLVD., SUITE PH-1  
PLANTATION, FL 33324

**New Mailing Address:**

**FEI Number:** 59-2843211

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

LYONS, RICHARD  
10593 W. CLAIRMONT CIRCLE  
TAMARAC, FL 33321 US

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

SCHLEIFER, ESTY  
10732 W. CLAIRMONT CIRCLE  
TAMARAC, FL 33321 US

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: ESTY SCHEIFER

04/14/2011

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: PD  
Name: SCHLEIFER, ESTY  
Address: 10732 W. CLAIRMONT CIRCLE  
City-St-Zip: TAMARAC, FL 33321

Title: S  
Name: FLANZ, BARBARA  
Address: 10761 W CLAIRMONT CIRCLE  
City-St-Zip: TAMARAC, FL 333217860

Title: VPD  
Name: KLEIN, SYLVIA  
Address: 10865 W CLAIRMONT CIRCLE  
City-St-Zip: TAMARAC, FL 33321

Title: T  
Name: FINER, ALAN  
Address: 10850 W. CLAIRMONT CIR.  
City-St-Zip: TAMARAC, FL 33321

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: ESTY SCHLEIFER

PD

04/14/2011

Electronic Signature of Signing Officer or Director

Date