2005 NOT-FOR-PROFIT CORPORATION

FILED Feb 22, 2005 8:00 am Secretary of State

71111-071-				_		J	
DOCUMENT # N26648 1. Entity Name CLAIRMONT CONDOMINIUM F ASSOCIATION, INC.					02-22-2005	90027 002 **** <i>€</i>	51.25
8211 W BROWARD BLVD. STE PH1 8211 W BROWARD BL		.VD. STE PH1			NOIF ONIO CINI CINI CINI		
2. Principal Place of Business 3. Mai		Mailing Address					
Suite, Apt. #, etc.		Suite, Apt. #, etc.		02102005	Chg-NP	CR2E037 (10/03)	
City & State		City & State		4. FEI Number Applied For 65-0051904 Not Applicable			
Country	Zip	Countr	у ~	5. Certificate of	f Status Desired		
Name and Address of Current R	egistered Agent			7. Name and	Address of New F	legistered Agent	
BROMBERG, MARVIN 10604 W CLAIRMONT CIR TAMARAC, FL 33321			Name Street Address (P.O. Box Number is Not Acceptable)				
33321		(City			FL Zip Co	de .
ed entity submits this statement for of registered agent.	the purpose of changing its re	egistered o	office or registe	red agent, or both	, in the State of Flo	orida. I am familiar wit	n, and accept
	ALON TO A CONTROL OF THE CONTROL OF			d od o o o o o o o o o o o o o o o o o		DATE	
ure, typed or printed name of registered agent as	nd title if applicable. (NOTE: I	Hegistered Ag	ent signature requirer	d when reinstating)		DATE	
				\$5.00 May Be Added to Fees			
10. OFFICERS AND DIRECTORS 11				ADDITIONS/CHA	NGES TO OFFICE	RS AND DIRECTORS	N 10
		_		7.00			
OMBERG, MARVIN 524 W CLAIRMONT CIRCLE	NAM Stre					E. Grange	, radikari
MARAC, FL 33321			- ZIP			Change	Addition
LEVIN, ALICE 504 W CLAIRMONT CIR RT LAUDERDALE, FL 33321							
LLER, MARVIN	Delete	TITLE			-	Change	Addition
RT LAUDERDALE, FL 33321							
EDMAN MAN	☐ Delete	TITLE NAME				☐ Change	Addition
20 W CLAIRMONT CIR		STREET A					}
	☐ Delete	CITY-ST- TITLE NAME STREET A	- ZIP ODRESS	,		☐ Change	Addition
20 W CLAIRMONT CIR	☐ Delete	CITY-ST- TITLE NAME	- ZIP ODRESS	•			Addition
	CONDOMINIUM F ASSO usiness ASUITE 201 BLVD. STE PH1 33324 f Business Country Name and Address of Current R MARVIN RMONT CIR 33321 Indentity submits this statement for fregistered agent. Indentity submits this statement for fregistered agent are submitted to the statement for fregistered agent. Indentity submits this statement for fregistered agent are submitted to the submitted transport of fregistered agent. Indentity submits this statement for fregistered agent are submitted to the submitted transport of fregistered agent. Indentity submits this statement for fregistered agent are submitted to the submitted transport of fregistered agent. Indentity submits this statement for fregistered agent are submitted to the submitted transport of fregistered agent. Indentity submits this statement for fregistered agent are submitted to the submitted transport of fregistered agent. 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Usiness ASUITE 201 BBLVD. STE PH1 B3324 F Business 3. Mailing Address WGOLDMAN & JUDASUITE 33324 F Business 3. Mailing Address Suite, Apt. #, etc. City & State Country Zip Name and Address of Current Registered Agent MARVIN RMONT CIR 33321 Indientity submits this statement for the purpose of changing its refered agent. Indientity submits this statement for the purpose of changing its refered agent. Indientity submits this statement for the purpose of changing its refered agent. Indientity submits this statement for the purpose of changing its refered agent. Indientity submits this statement for the purpose of changing its refered agent. Indientity submits this statement for the purpose of changing its refered agent. Indientity submits this statement for the purpose of changing its refered agent. Indientity submits this statement for the purpose of changing its refered agent. Indientity submits this statement for the purpose of changing its refered agent. 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ARVIN RMONT CIR 33321 Get is \$61.25 by May 1, 2005 OFFICERS AND DIRECTORS Delete EVIN, ALICE OW W CLAIRMONT CIR RT LAUDERDALE, FL 33321 Mailing Address Mailing Address Suite, Apt. #, etc. City & State Country Zip Country Name ARRVIN Street Address: Name Name Name Name Street Address: (NOTE Registered Agent separations of the purpose of changing its registered Agent separations of the purpose of changing its registered office or register registered agent. Delete TITLE MAME STREET ADDRESS CITY-ST-ZIP Delete TITLE TABLET ADDRESS CITY-ST-ZIP TITLE TABLET ADDRESS CITY-ST-ZIP Delete TITLE TABLET ADDRESS CITY-ST-ZIP TITLE TABLET ADDRESS CITY-ST-ZIP TITLE TABLET ADDRESS CITY-ST-ZIP TITLE TABLET ADDRESS CITY-ST-ZIP TITLE TITLE TABLET ADDRESS CITY-ST-ZIP TITLE TABLET ADDRESS CITY-ST-ZIP	CONDOMINIUM F ASSOCIATION, INC. Siness	CONDOMINIUM F ASSOCIATION, INC. Siness	Lisiness A-SUITE 201 SUIDA—SUITE 201 SUIDA—SUITE 201 SUIDA—SUITE 201 SUIDA—SUITE 201 SUITE 201 S

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.

CITY-ST-ZIP

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR