


2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

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

08-22-2005 90062 045 ****61.25

DOCUMENT # N36058

1. Entity Name
CARRIAGE HOMES AT TERRAMAR CONDOMINIUM ASSOCIATION, INC.



Principal Place of Business
6421 CONGRESS AVE
110
BOCA RATON, FL 33487

Mailing Address
6421 CONGRESS AVE
110
BOCA RATON, FL 33487 US

50062706



2. Principal Place of Business
 Suite, Apt. #, etc.

3. Mailing Address
 Suite, Apt. #, etc.

08032005 Chg-NP CR2E037 (10/03)

City & State
 Zip Country

4. FEI Number
59-1572921

Applied For
 Not Applicable

5. Certificate of Status Desired **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

LOHR, ELLEN
6421 CONGRESS AVE #110
BOCA RATON, FL 33487

7. Name and Address of New Registered Agent

Name **CINDY WHITTLE I PM**
 Street Address (P.O. Box Number is Not Acceptable) **963 UNIVERSITY AVE**
CORAL SPRING FLORIDA
 City **FL** Zip Code **33067**

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 *Cindy Whittle* DATE **8/23/05**

Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

Filing Fee is \$61.25
Due by September 7, 2005

9. Election Campaign Financing Trust Fund Contribution. **\$5.00 May Be Added to Fees**

Make check payable to Florida Department of State

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD BELLUSCI, JOSEPH 7525 NW 61ST TERRACE #1204 PARKLAND, FL 33067 <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VTD MILLER, CAROL 7525 NW 61ST TERRACE #1701 PARKLAND, FL 33067 <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	STD GORDON, ROBIN 7525 NW 61ST TERRACE #401 PARKLAND, FL 33067 <input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D SIMON, HOWARD 7525 NW 61ST TERRACE #1102 PARKLAND, FL 33067 <input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D KERSTEN, TIM 7525 NW 61ST TERRACE #3304 PARKLAND, FL 33067 <input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	AT LARGE Kathleen Murphy 7525 NW 61st Terrace #1103 Parkland Fl 33067 <input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Secretary Amy Wasserman 7525 NW 61 Terr #1104 Parkland, FL 33067 <input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V P Ken Dana S 7525 NW 61 Terr #1003 Parkland, FL 33067 <input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

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.

SIGNATURE: *T. D. Shearman* DATE: **8/13/05** DAYTIME PHONE: **954 931 8412**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR