

# 2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N98000004660

FILED  
Apr 20, 2011  
Secretary of State

**Entity Name:** CARLTON LAKES HOMEOWNERS I ASSOCIATION, INC.

**Current Principal Place of Business:**

C/O CAMBRIDGE MANAGEMENT  
2335 TAMIAMI TRAIL N, STE. 402  
NAPLES, FL 34103

**New Principal Place of Business:**

**Current Mailing Address:**

C/O CAMBRIDGE MANAGEMENT  
2335 TAMIAMI TRAIL N, STE. 402  
NAPLES, FL 34103

**New Mailing Address:**

FEI Number: 65-0810670

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

CAMBRIDGE MANAGMENT OF SWFL  
2335 TAMIAMI TRAIL N  
STE. 402  
NAPLES, FL 34103 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: P  
Name: JOHNSON, ORRIS J  
Address: 6066 HIGHWOOD PARK COURT  
City-St-Zip: NAPLES, FL 34110

Title: S  
Name: RAICA, JUDY  
Address: 6033 HIGHWOOD PARK LANE  
City-St-Zip: NAPLES, FL 34110

Title: T  
Name: CRUDELE, ROBIN  
Address: 6001 HIGHWOOD PARK LANE  
City-St-Zip: NAPLES, FL 34110

Title: D  
Name: BREE, ROBERT  
Address: 6009 HIGHWOOD PARK LANE  
City-St-Zip: NAPLES, FL 34110

Title: D  
Name: GAGNON, JEFF  
Address: 6005 HIGHWOOD PARK LANE  
City-St-Zip: NAPLES, FL 34110

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: JAMES MEADE

MA

04/20/2011

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

\_\_\_\_\_  
Date