

2013 FLORIDA NOT FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# 721392

Entity Name: THE CLARIDGE OF POMPANO CONDOMINIUM, INC.

Current Principal Place of Business:

1340 S OCEAN BLVD
POMPANO BEACH , FL 33062

Current Mailing Address:

1340 S OCEAN BLVD
POMPANO BEACH, FL 33062 US

FEI Number: 59-1437259

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

KAYE BENDER REMBAUM, P.L.
1200 PARK CENTRAL BLVD SOUTH
POMPANO BCH, FL 33064 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: _____

Electronic Signature of Registered Agent

_____ Date

Officer/Director Detail :

Title PRESIDENT
Name SMITH , RUSSELL
Address 1340 S OCEAN BLVD
City-State-Zip: POMPANO BEACH FL 33062

Title SECRETARY
Name HUTCHCROFT, SUSAN
Address 1340 S OCEAN BLVD
City-State-Zip: POMPANO BEACH FL 33062

Title ASST. SECRETARY
Name ROMANO , CAROL
Address 1340 S OCEAN BLVD
City-State-Zip: POMPANO BEACH FL 33062

Title VP
Name SINCAVAGE, WILLIAM
Address 1340 S OCEAN BLVD
City-State-Zip: POMPANO BEACH FL 33062

Title TREASURER
Name NIXON, BRIAN
Address 1340 S OCEAN BLVD
City-State-Zip: POMPANO BEACH FL 33062

Title DIRECTOR
Name D'AMORE, PAUL
Address 1340 S OCEAN BLVD
City-State-Zip: POMPANO BEACH FL 33062

Title DIRECTOR
Name SEQUENZIA, HENRY
Address 1340 S OCEAN BLVD
City-State-Zip: POMPANO BEACH FL 33062

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: BRIAN NIXON

TREASURER

04/03/2013

Electronic Signature of Signing Officer/Director Detail

Date