

**2013 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 742420

**Entity Name:** CAMDEN L CONDOMINIUM ASSOCIATION, INC.

**FILED**  
**Mar 08, 2013**  
**Secretary of State**  
**CC0875706213**

**Current Principal Place of Business:**

C/O FELICE SCIOTTO  
278 CAMDEN L  
WEST PALM BEACH, FL 33417

**Current Mailing Address:**

C/O FELICE SCIOTTO  
278 CAMDEN L  
WEST PALM BEACH, FL 33417 US

**FEI Number: 59-1635141**

**Certificate of Status Desired: No**

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

SCIOTTO, FELICE  
278 CAMDEN L  
WEST PALM BEACH, FL 33417 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 P  
Name SCIOTTO, FELICE  
Address 278 CAMDEN L  
City-State-Zip: WEST PALM BEACH FL 33417

Title VP  
Name KARPEICHIK, JUDY  
Address 272 CAMDEN L  
City-State-Zip: WEST PALM BEACH FL 33417

Title T  
Name THEIS, WILLIAM  
Address 45 MARKET ST  
City-State-Zip: PORT JEFFERSON NY 11776

Title S  
Name VISKOVICH, MARIE  
Address 49 SIMMONS DR  
City-State-Zip: EAST ISLIP NY 11730

Title D  
Name BILLONE, NICHOLAS  
Address 33-31 JORDAN ST  
City-State-Zip: FLUSHING NY 11358

*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: FELICE SCIOTTO**

**PRESIDENT**

**03/08/2013**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date