

2024 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N00000000885

Entity Name: CARLTON VERO BEACH CONDOMINIUM ASSOCIATION, INC.

FILED
Apr 19, 2024
Secretary of State
1963331977CC

Current Principal Place of Business:

ONE BEACH CLUB PLACE
VERO BEACH, FL 32963-3629

Current Mailing Address:

ONE BEACH CLUB PLACE
VERO BEACH, FL 32963-3629 US

FEI Number: 65-0979984

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

DISTL, SHELLY M
ONE BEACH CLUB PLACE
VERO BEACH, FL 32963-3629 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: SHELLY DISTL

04/19/2024

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title TREASURER
Name FLACHS, BRUCE
Address C/O CARLTO VERO BEACH OFFICE
 ONE BEACH CLUB PLACE
City-State-Zip: VERO BEACH FL 32963-3629

Title DIRECTOR
Name BERGSTROM, DIANNE
Address C/O CARLTON VERO BEACH OFFICE
 ONE BEACH CLUB PLACE
City-State-Zip: VERO BEACH FL 32963-3629

Title DIRECTOR
Name ZIEGLER, FRANK
Address C/O CARLTON VERO BEACH OFFICE
 ONE BEACH CLUB PLACE
City-State-Zip: VERO BEACH FL 32963-3629

Title PRESIDENT
Name MCGOWAN, RAYMOND
Address C/O CARLTON VERO BEACH OFFICE
 ONE BEACH CLUB PLACE
City-State-Zip: VERO BEACH FL 32963-3629

Title SECRETARY
Name VENTLING, MARK
Address C/O CARLTON VERO BEACH OFFICE
 ONE BEACH CLUB PLACE
City-State-Zip: VERO BEACH FL 32963-3629

Title VP
Name REDING, DENNIS
Address C/O CARLTON VERO BEACH OFFICE
 ONE BEACH CLUB PLACE
City-State-Zip: VERO BEACH FL 32963-3629

Title DIRECTOR
Name HARVEY, DON
Address C/O CARLTON VERO BEACH OFFICE
 ONE BEACH CLUB PLACE
City-State-Zip: VERO BEACH FL 32963-3629

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: RAYMOND MCGOWAN

PRESIDENT

04/19/2024

Electronic Signature of Signing Officer/Director Detail

Date