

**2016 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N00000005502

**Entity Name:** CARLTON VERO BEACH CABANA CONDOMINIUM ASSOCIATION, INC.

**FILED**  
**Mar 29, 2016**  
**Secretary of State**  
**CC6633953172**

**Current Principal Place of Business:**

1 BEACH CLUB PLACE  
VERO BEACH, FL 32963

**Current Mailing Address:**

1 BEACH CLUB PLACE  
VERO BEACH, FL 32963

**FEI Number: 65-1033575**

**Certificate of Status Desired: No**

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

DISTL, DOUGLAS G  
ONE BEACH CLUB PL  
VERO BEACH, FL 32963 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            VICE PRESIDENT, TREASURER  
Name            COLEMAN, H. RICHARD  
Address        200 BEACH VIEW DRIVE, 3 NORTH  
City-State-Zip: VERO BEACH FL 32963

Title            PRESIDENT  
Name            CLIFFORD, JOHN  
Address        500 BEACHVIEW DRIVE  
                  PHN  
City-State-Zip: VERO BEACH FL 32963

Title            SECRETARY  
Name            BERGSTROM, DIANNE  
Address        400 BEACHVIEW DRIVE  
                  PHS  
City-State-Zip: VERO BEACH FL 32963

*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: JOHN CLIFFORD**

**PRESIDENT**

**03/29/2016**

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

\_\_\_\_\_  
Date