

**2014 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N05000011772

**Entity Name:** CLAREMONT PLACE CONDOMINIUM ASSOCIATION CORPORATION

**FILED**  
**Feb 27, 2014**  
**Secretary of State**  
**CC5486461185**

**Current Principal Place of Business:**

2005 SAN SOUCI BOULEVARD  
MANAGEMENT OFFICE  
NORTH MIAMI, FL 33181

**Current Mailing Address:**

1060 KANE CONCOURSE  
SUITE 200  
BAY HARBOR ISLAND, FL 33154

**FEI Number: APPLIED FOR**

**Certificate of Status Desired: No**

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

LJ SERVICES GROUP  
1060 KANE CONCOURSE  
SUITE #200  
BAY HARBOR, FL 33154 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 PD  
Name REICHERT, WARWICK  
Address 1060 KANE CONCOURSE  
SUITE 200  
City-State-Zip: BAY HARBOR ISLAND FL 33154

Title VPD  
Name WAZIRY, BEN  
Address 1060 KANE CONCOURSE  
SUITE 200  
City-State-Zip: BAY HARBOR ISLAND FL 33154

Title SECRETARY  
Name KATZ, EDWARD  
Address 1060 KANE CONCOURSE  
SUITE 200  
City-State-Zip: BAY HARBOR ISLAND FL 33154

*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: WARWICK REICHERT**

**PRESIDENT**

**02/27/2014**

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

\_\_\_\_\_  
Date