### 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.

Ρ

#### SIGNATURE: STANLEY KRAVITZ

DEITSCH, ROSLYN

City-State-Zip: TAMARAC FL 33321

10458 E CLAIRMONT CIR

Name Address

Electronic Signature of Signing Officer/Director Detail

SIGNATURE.			
	Electronic Signature of Registered Agent		
Officer/Director Detail :			
Title	PD	Title	TREASURER
Name	KRAVITZ, STANLEY	Name	KANTOR, RUTH
Address	10466 E CLAIRMONT	Address	10401 E CLAIRMONT CIR
City-State-Zip:	TAMARAC FL 33321	City-State-Zip:	TAMARAC FL 33321
Title	D	Title	VP
Name	ROSEN, LARRY	Name	WEISS, SALLY
Address	10454 E CLARMONT CIR.	Address	10468 E CLAIRMONT CIRCLE
City-State-Zip:	TAMARAC FL 33321	City-State-Zip:	TAMARAC FL 33321
Title	DIRECTOR		

TAMARAC, FL 33321 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

# **Current Mailing Address:**

10438 E. CLAIRMONT CIRCLE

TAMARC. FL

DOCUMENT# N22190

8211 W. BROWARD BLVD. SUITE PH-1, 6TH FLOOR PLANTATION, FL 33025 US

**Current Principal Place of Business:** 

#### FEI Number: 59-2843207

## Name and Address of Current Registered Agent:

KRAVITZ, STANLEY S 10466 E CLAIRMONT CIR

Entity Name: CLAIRMONT CONDOMINIUM B ASSOCIATION, INC.

#### FILED Jan 09, 2014 Secretary of State CC9484818823

Certificate of Status Desired: No

Date