

**2022 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N22190

**Entity Name:** CLAIRMONT CONDOMINIUM B ASSOCIATION, INC.

**Current Principal Place of Business:**

10438 E. CLAIRMONT CIRCLE  
TAMARAC, FL 33321

**Current Mailing Address:**

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

**FEI Number:** 59-2843207

**Certificate of Status Desired:** No

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

VALANCY & REED, P.A.  
310 SE 13TH STREET  
FORT LAUDERDALE, FL 33316 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 SECRETARY  
Name GINSBERG, DENISE  
Address 10462 E. CLAIRMONT CIRCLE  
City-State-Zip: TAMARAC FL 33321

Title PRESIDENT  
Name MAZER, GAIL  
Address 10440 E. CLAIRMONT CIRCLE  
City-State-Zip: TAMARAC FL 33321

Title TREASURER, VP  
Name SULLIVAN, ED  
Address 10406 E. CLAIRMONT CIRCLE  
City-State-Zip: TAMARAC FL 33321

Title DIRECTOR  
Name JACKSON, JANET  
Address 10454 E. CLAIRMONT CIRCLE  
City-State-Zip: TAMARAC FL 33321

*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:** GAIL MAZER

PRESIDENT

03/02/2022

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

\_\_\_\_\_ Date