## 2015 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N26648

Entity Name: CLAIRMONT CONDOMINIUM F ASSOCIATION, INC.

FILED
Jan 20, 2015
Secretary of State
CC2624388434

## **Current Principal Place of Business:**

C/O JUDA, ESKEW & ASSOCIATES,P.A. 8211 W BROWARD BLVD. STE PH1 PLANTATION, FL 33324

## **Current Mailing Address:**

C/O JUDA, ESKEW & ASSOCIATES, P.A. 8211 W BROWARD BLVD. STE PH1 PLANTATION, FL 33324 US

FEI Number: 65-0051904 Certificate of Status Desired: No

## Name and Address of Current Registered Agent:

BROMBERG, MARVIN 10624 W. CLAIRMONT CIR 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: MARVIN BROMBERG 01/20/2015

Electronic Signature of Registered Agent

Date

Officer/Director Detail:

Title PD Title VD

Name BROMBERG, MARVIN Name SAPORTA, JUDY

Address 10624 W CLAIRMONT CIRCLE Address 10608 W CLAIRMONT CIRCLE

City-State-Zip: TAMARAC FL 33321 City-State-Zip: TAMARAC FL 33321

Title TREASURER Title SECRETARY

Name FLISSER, ESTELLE Name CARRADIN, DON

Address 10654 W CLAIRMONT CIR Address 10642 W CLAIRMONT CIRCLE

City-State-Zip: TAMARAC FL 33321 City-State-Zip: TAMARAC FL 33321

Title DIRECTOR
Name LUBER, JAMES

Address 10664 WEST 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: MARVIN BROMBERG

Electronic Signature of Signing Officer/Director Detail

**PRESIDENT** 

01/20/2015