

**2013 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N27747

**FILED**  
**Mar 19, 2013**  
**Secretary of State**  
**CC1853688172**

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

**Current Principal Place of Business:**

C/O GOLDMAN, JUDA & ESKEW, P.A.  
8211 W. BROWARD BLVD. PH. 1  
PLANTATION, FL 33324

**Current Mailing Address:**

C/O GOLDMAN, JUDA & ESKEW , P.A.  
8211 W. BROWARD BLVD. PH. 1  
PLANTATION, FL 33324

**FEI Number:** 65-0071840

**Certificate of Status Desired:** No

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

ZUCKERMAN, SAM  
10701 WEST CLAIRMONT CIRCLE  
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:**

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**Officer/Director Detail :**

Title T  
Name JACOBS, STEVEN  
Address 10699 W CLAIRMONT CIRCLE  
City-State-Zip: TAMARAC FL 33321

Title VPD  
Name PATCHEN, STEVEN  
Address 10689 W. CLAIRMONT CIRCLE  
City-State-Zip: TAMARAC FL 33321

Title S  
Name DENNI, DIANE  
Address 10687 W CLAIRMONT CIRCLE  
City-State-Zip: TAMARAC FL 33321

Title DP  
Name ZUCKERMAN, SAM  
Address 10701 W. CLAIRMONT CIRCLE  
City-State-Zip: TAMARAC FL 33321

Title D  
Name CENTORE, ANTHONY  
Address 10713 W CLAIRMONT CIR  
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: SAM ZUCKERMAN**

**PRESIDENT**

**03/19/2013**

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

\_\_\_\_\_  
Date