

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

DOCUMENT# N36058

**FILED**  
**Jan 24, 2013**  
**Secretary of State**  
**CC2407815075**

**Entity Name:** CARRIAGE HOMES AT TERRAMAR CONDOMINIUM ASSOCIATION, INC.

**Current Principal Place of Business:**

5665 CORAL RIDGE DRIVE  
CORAL SPRINGS, FL 33076

**Current Mailing Address:**

5665 CORAL RIDGE DRIVE  
CORAL SPRINGS, FL 33076

**FEI Number: 59-1572921**

**Certificate of Status Desired: No**

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

WHITTLE, CINDY  
5665 CORAL RIDGE DRIVE  
CORAL SPRINGS, FL 33076 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 SD  
Name GORDON, ROBIN  
Address 5665 CORAL RIDGE DRIVE  
City-State-Zip: CORAL SPRINGS FL 33076

Title VPD  
Name LEVINE, PAM  
Address 5665 CORAL RIDGE DRIVE  
City-State-Zip: CORAL SPRINGS FL 33076

Title TD  
Name WING, JERRY  
Address 5665 CORAL RIDGE DRIVE  
City-State-Zip: CORAL SPRINGS FL 33076

Title PD  
Name BELLUSCI, JOSEPH  
Address 5665 CORAL RIDGE DRIVE  
City-State-Zip: CORAL SPRINGS FL 33076

Title D  
Name FINSTAD, MATT  
Address 5665 CORALRIDGE DR  
City-State-Zip: CORAL SPRINGS FL 33076

*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: JOSEPH BELLUSCI**

**PD**

**01/24/2013**

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

\_\_\_\_\_  
Date