

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 707030

FILED
May 01, 2007
Secretary of State

Entity Name: CARLTON HOUSE MANAGEMENT ASSOCIATION, INC.

Current Principal Place of Business:

2701 S. OCEAN BLVD.
HIGHLAND BEACH, FL 33487

New Principal Place of Business:

Current Mailing Address:

2701 S. OCEAN BLVD.
HIGHLAND BEACH, FL 33487

New Mailing Address:

FEI Number: 59-1050137 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

HOLDER, JAMES
2701 S OCEAN BLVD
HIGHLAND BEACH, FL 33487 US

Name and Address of New Registered Agent:

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

OFFICERS AND DIRECTORS:

Title: VP/S () Delete
Name: CHUDZIK, LORETTA
Address: 2701 S. OCEAN BLVD #31
City-St-Zip: HIGHLAND BEACH, FL 33487

Title: D () Delete
Name: FENNEY, NICHOLAS
Address: 2701 SO OCEAN BLVD #33
City-St-Zip: HIGHLAND BEACH, FL 33487

Title: D () Delete
Name: BOOS, RICHARD
Address: 2701 SO OCEAN BLVD #22
City-St-Zip: HIGHLAND BEACH, FL 33487

Title: PRES () Delete
Name: FOSTER, DORIS
Address: 2701 SO OCEAN BLVD #46
City-St-Zip: HIGHLAND BEACH, FL 33487

Title: T () Delete
Name: BISSEGGER, CHARLES
Address: 2701 S. OCEAN BLVD #25
City-St-Zip: HIGHLAND BEACH, FL 33487

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: DORIS FOSTER

PRES

05/01/2007

Electronic Signature of Signing Officer or Director

Date