

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 732102

FILED  
Mar 12, 2009  
Secretary of State

Entity Name: CAMINO NORTH CONDOMINIUM ASSOCIATION, INC.

## Current Principal Place of Business:

C/O RESIDENTIAL MANAGEMENT  
PO BOX 97-0069  
BOCA RATON, FL 334970069

## New Principal Place of Business:

C/O RESIDENTIAL MANAGEMENT  
778 SOUTH MILITARY TRAIL  
DEERFIELD BEACH, FL 33442

## Current Mailing Address:

C/O RESIDENTIAL MANAGEMENT  
PO BOX 97-0069  
BOCA RATON, FL 334970069

## New Mailing Address:

FEI Number: 59-1660419      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

PALOMBI, GARY  
778 SOUTH MILITARY TRAIL  
DEERFIELD BEACH, FL 33442      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: D ( ) Delete  
Name: BAUER, GILDA  
Address: 250 SW 7 ST #15  
City-St-Zip: BOCA RATON, FL 33432

Title: P ( ) Delete  
Name: RETAMAR, RICK  
Address: 345 NE OLIVE WAY  
City-St-Zip: BOCA RATON, FL 33432

Title: VP ( ) Delete  
Name: TWISS, JAMES F  
Address: 220 S.W. 7TH STREET #7  
City-St-Zip: BOCA RATON, FL 33432

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: D (X) Change ( ) Addition  
Name: RETAMAR, RICK  
Address: 345 NE OLIVE WAY  
City-St-Zip: BOCA RATON, FL 33432

Title: P (X) Change ( ) Addition  
Name: TWISS, JAMES F  
Address: 220 S.W. 7TH STREET #7  
City-St-Zip: BOCA RATON, FL 33432

Title: D ( ) Change (X) Addition  
Name: NACLERIO, ED  
Address: 200 S.W. 7TH STREET #4  
City-St-Zip: BOCA RATON, FL 33442

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: GARY PALOMBI

A

03/12/2009

Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date