2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 11, 2012
Secretary of State

DOCUMENT# 732102

Entity Name: CAMINO NORTH CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

PROPERLY MANAGED, INC.
7491 N. FEDERAL HWY, SUITEC5 PMB 246
BOCA RATON, FL 33487

New Principal Place of Business:

Current Mailing Address:

PROPERLY MANAGED, INC.
7491 N. FEDERAL HWY, SUITEC5 PMB 246
BOCA RATON, FL 33487

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:

GEISER, MARY
7491 N FEDERAL HWY SUITE C5 PMB 246
BOCA RATON, 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: D
Name: ANDREWS, JULIE
Address: 630 NW 7TH AVE
City-St-Zip: BOCA RATON, FL 33486

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

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

Title: VP
Name: NACLERIO, ED
Address: 200 S.W. 7TH STREET #4
City-St-Zip: BOCA RATON, FL 33432

Title: S/T
Name: BAUER, GILDA
Address: 250 SW 7TH STREET #15
City-St-Zip: BOCA RATON, FL 33432

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: MARY GEISER AGEN 04/11/2012

Electronic Signature of Signing Officer or Director — Date