FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION **ANNUAL REPORT**



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS

(9)

1996

DOCUMENT #

749503

THE CARLTON COMPONING ACCOCIATION INC

Principal Place	CE OF BUSINESS SUNRISE BOULEVARD SERDALE FL 33304	Mailing Address 3000 EAST SUNRISE E FORT LAUDERDALE FI		·					
2 Dringing C	No. of D					 Date Incorporated or Qualif 10/25/1979 	ied 3	a. Date of Las 02/08/	
21	Place of Business	2a. Mailing Address 26				4. FEI Number 59-1959353			Applied For Not Applicable
Suite, Apt 22 City & Sta		Suite, Apt. #, etc.				5. Certificate of Status Desired	ı 🗅		5 Additional
Zip		City & State				Election Campaign Financin Trust Fund Contribution	ng 🔲	\$5.0	00 May Be led to Fees
24	25	25 29 30		ntry	This corporation has liability for intangible tax under s. 199.032, Florida Statutes				
	Name and Address of Current Registered Agent					10. Name and Address of Ne	w Registe	red Agent	
ASHCRAFT, WILLIAM E 315 NE 3RD AVE 2 FLOOR FT LAUDERDALE FL 33301				83 City	ENGE Address YANK 3230	CLBERG, CANTOR & (P.O. Box Number is Not Accept KEE CLIPPER CENTED STIRLING ROAD	ptable) ER	85 Zi	lip Code
iairillai w	to the provisions of Sections 617.05 red agent, or both, in the State of Ficith, and accept the obligations of, Se	ection 617.0503, Florida Statutes	es, the aboved by the c	/e-named corporation's		JYWOOD n submits this statement for the directors. I hereby accept the a			ip Code 302 I registered office d agent. I am
SIGNATURE (Signature, typed or printed name of registered ago	ent and title if applicable The	TE: Registered	Social signal sea	Can	/ , U.V.		_571	96
12.	OFFICERS A	ND DIRECTORS	13.	ngent signature	Leidhled Mue	ADDITIONS/CHANGES TO	ANTO PAT	AND DIDECT	ODC IN 10
TITLE	D	DETETE	1.1 ไปป	LE	DVP	7 III DI TOTO O I ATTOLO TO C	JITIOENS ,	[] Change	Addition
NAME	CAMAIONI, JOHN	- 1 ,	1.2 NA	ME	Jos	EPH LAZAROW		0.14.194	(A) / Naoritori
STREET ADDRESS	3000 E SUNRISE BLVD			REET ADDRESS	1	O E. SUNRISE BLV	'D		
CITY-ST-ZIP	FT. LAUDERDALE FL		1.4 C(T	Y-ST-ZIP	FT.	LAUDERDALE, FL.	υ.		
TITLE	DP ANDEDCON LOUIC C	DEFELE	2.1 T(T)	.E	D			Change	X Addition
NAME	ANDERSON, LOUIS C 3000 E. SUNRISE BLVD	•	2.2 NAM	ИE	GAR	Y HANDERHAN		-	
STREET ADDRESS	FT. LAUDERDALE FL		2.3 STREET ADDRESS		300	3000 E. SUNRISE BLVD.			
CITY-ST-ZIP TITLE	STD	f Dr. ere		Y-ST-ZIP	FT. LAUDERDALE, FL.				
NAME	GLASGOW, IRRRIS	DELETE	3.1 TITL					Change	Addition
STREET ADDRESS	3000 E. SUNRISE BLVD.		3.2 NAN	_	ļ				
CITY-ST-ZIP	FT LAUDERDALE FL			EET ADDRESS					
TITLE	D	DELETE		Y-S1-ZIP	 				
NAME	Franklin, Sheila	Correct	4.1 TITL			•		Change	☐ Addition
STREET ADDRESS	3000 E. SUNRISE BLVD			4. 2 NAME					
CITY - ST - ZIP	FT. LAUDERDALE FL			4.3 STREET ADDRESS 4.4 CITY-ST-ZIP					ļ
TITLE	PRESIDENT	DELETE			Doce	IDENT	···		
NAME	Moore, Jesse Lee	1		5.1 TITLE 5.2 NAME		VERT		Change	Addition
STREET ADDRESS	3000 E SUNRISE BLVD			ET ADDRESS					ļ
CITY-ST-ZIP	FT. LAUDERDALE FL		5.3 STR						
TITLE	· · · · · · · · · · · · · · · · · · ·	DELETE	6.1 TITLI						
NAME		_	6.2 NAM	I				☐ Change	☐ Addition
STREET ADDRESS				ET ADDRESS					
CITY-ST-ZIP			6.3 SINC						

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)/k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under appears in Block 12 or Block 13.1 changer, by on an attachment with an address.

SIGNATURE: JULY JE MORE DES PRIS , SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR