

# **2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 750182

**FILED**  
**Apr 26, 2011**  
**Secretary of State**

**Entity Name:** CARLETON PLACE CONDOMINIUM ASSOCIATION, INC.

**Current Principal Place of Business:**

AMER. CONDO MGMT  
615 CAPE CORAL PARKWAY WEST SUITE 103  
CAPE CORAL, FL 33914 US

**New Principal Place of Business:**

**Current Mailing Address:**

AMER. CONDO MGMT  
615 CAPE CORAL PARKWAY WEST SUITE 103  
CAPE CORAL, FL 33914 US

**New Mailing Address:**

**FEI Number:** 59-2174650

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

KASE, SUSAN  
AMER CONDO MGMT INC  
615 CAPE CORAL PARKWAY WEST SUITE 103  
CAPE CORAL, FL 33914 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: P  
Name: POLZIN, BONNIE  
Address: 3903 SE 11TH AVE, #102  
City-St-Zip: CAPE CORAL, FL 33904 US

Title: D  
Name: DRYDEN, CAROL  
Address: 3916 SE 11TH PL  
City-St-Zip: CAPE CORAL, FL 33904 US

Title: SD  
Name: MERKLE, PATTY  
Address: 3903 SE 11TH AVE,  
City-St-Zip: CAPE CORAL, FL 33904 US

Title: T  
Name: SOMMERS, SUSAN  
Address: 3916 SE 11TH PL #501  
City-St-Zip: CAPE CORAL, FL 33904 US

Title: VP  
Name: DENNIS, KEN  
Address: 3916 SOUTHEAST 11TH PLACE  
City-St-Zip: CAPE CORAL, FL 33904

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: BONNIE POLZIN

PRES

04/26/2011

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date