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NONPROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #1. Corporation Name

751430

(0)

THE CARLTON (BOCA RATON) CONDOMINIUM ASSOCIATION

FILED

Apr 23 1998 8:00am

Secretary of State

| , INC. | | | | | | |
|--|---|--|---------------|-----------|----------------|--|
| Principal Place of Business | | Malling Address | | | | T FEBRUS 1888S BINDS FIRM BUSDE FIRM BOSK BURIN BURIN BURIN BURIN HUBIN |
| 901 E CAMINO REAL BOCA RATON FL 33432 US | | 901 E CAMINO REAL BOCA RATON FL 33432 US | | | | 3. Date Incorporated or Qualified 03/07/1980 4. FEI Number Applied For |
| | | | | | | 59-2030377 Not Applicable |
| 2. Principal Pl | ace of Business | 2a. Mailing Address | | | | 5. Certificate of Status Desired 38.75 Additional |
| Suite, Apt. 4 | # atc | Suite, Apt. #, etc. | | | | Fee Required 6. Election Campaign Financing \$5.00 May Be |
| 22 | w, 610. | 27 | | | | Trust Fund Contribution Added to Fees |
| City & State | | Crty & State | | | | 7. Is this nonprofit corporation a homeowners association? |
| 23 | | 28 | | | | Yes No |
| Zip | Country | Zιp | Coun | | | This corporation owes or has paid the current year Intangible Personal Property Tax due June 30 Yes No |
| 24 | 9. Name and Address of Current | 29 Registered Agent | 30 | | | Personal Property Tax due June 30. Yes No 10. Name and Address of New Registered Agent |
| | J. Halle and Houses of Current | Tiogration Nation | | 81 | Name | |
| POLIAKO | OFF, GARY A., ESQ. | | | 82 | Stroot A | Address (P.O. Box Number is Not Acceptable) |
| 450 AUSTRALIAN AVE., SUITE 720 | | | | | Subbir | Address (F.O. Box Humber is Not Addeptation) |
| WEST PA | ALM BEACH FL 33401 | | | в3 | | |
| | | | | 64 | City | FL 85 Zip Code |
| 11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its reflice or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as reagent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes. | | | | | | |
| agent. I a | m familiar with, and accept the obliga | tions of, Section 617.0503, FI | orida Stat | utes | i. | , |
| SIGNATURE _ | Signature, typed or printed name of registered ager | y and title if annivable (NO) | F: Decistered | 1 Acres | nt elonatura | required when reinstaling) DATE |
| 12. | OFFICERS AND | | 13. | ı Ağa | (f Signa)ura | ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 |
| TITLE | PD | DELETE | 1.1 70 | TLE | | Change Addition |
| NAME | Brooks, Marvin | | 1.2 NA | ME | | |
| STREET ADDRESS | 901 E CAMINO REAL #3D | | 1.3 \$1 | REET | address | |
| CITY - ST - ZIP | BOCA RATON FL | MI progre | 1.4 CI | | T-ZIP | Change Addition |
| TITLE | VD | ⚠ DELETE | | 2.1 TITLE | | Change Addition |
| NAME | COHEN, CAROLYN | | 2.2 N/ | | | |
| STREET ADDRESS | BOCA RATON FL | | | | ADDRESS | .u |
| CITY-ST-ZIP TITLE | SD SD | DELETE | 3.1 Tr | | ST-ZIP | VD K Change Addition |
| NAME | WINBERG, BURTON | — | 3.2 N | | | WINBERG, BURTON |
| STREET ADDRESS | 901 E CAMINO REAL #PH1C | | 3.3 STREE | | | 901 E. CAMINO REAL #PH1C |
| CITY-ST-ZIP | BOCA RATON FL | | 3.4. C | ITY-S | | BOCA RATON, FL 33432 |
| TITLE | TD | ☐ DELETE | 4.1 TJ | TLE | | SD K Change Addition |
| NAME | MOSER, MARCIA | | 4. 2 NAME | | | MOSER, MARCIA |
| STREET ADDRESS | 901 E CAMINO REAL #5C | | 4.3 S1 | REET | ADDRESS | 901 E. CAMINO REAL #5C |
| CITY - ST - ZIP | BOCA RATON FL | | 4.4 CI | TY-S | T- Z IP | BOCA RATON, FL 33432 |
| TITLE | VSD | ▼ DELETE | 5.1 TI | TŁE | | TD Change Addition |
| NAME | PIELET, JOAN | | 5.2 N/ | AME | | RONDINELLI, ROBERT |
| STREET ADDRESS | 901 E CAMINO REAL #15C | | | | ADDRESS | 901 E. CAMINO REAL #6B |
| CITY-ST-ZIP | BOCA RATON FL | | _ | | T-ZIP | BOCA RATON, FL 33432 ASD Change Addition |
| TITLE | | ☐ DELETE | 6.1 TI | | | — · · · · · · · · · · · · · · · · · · · |
| NAME | | | 6.2 N | | | GILMORE, PRESTON 901 E. CAMINO REAL#6B |
| STREET ADDRESS | | | 6.3 ST | TAEET | ADDRESS | POOR DAMON EL 22422 |

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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 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 in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

4-113 -98 561-395-6311