2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT#751430

FILED Apr 02, 2009 Secretary of State

Entity Name: THE CARLTON (BOCA RATON) CONDOMINIUM ASSOCIATION, INC.

	rincipal Place	of Business:	New Principal Place of Business:	New Principal Place of Business:		
	MINO REAL FON, FL 33432	2 US				
Current Mailing Address:			New Mailing Address:	New Mailing Address:		
	MINO REAL FON, FL 33432	2 US				
FEI Number:	59-2030377	FEI Number Applied For ()	FEI Number Not Applicable () Certificate of Status Desired ()		
Name and	Address of C	urrent Registered Agent:	Name and Address of New Registered Agent:			
3111 STEF FORT LAU	JDERDALE, FL	. 333126525 US	purpose of changing its registered office or registered agent, or b	ooth		
	of Florida.	abilitis tilis statement for the	purpose of changing its registered office of registered agent, of t	Jouri,		
SIGNATUR	RE:					
	Electron	ic Signature of Registered Ag	ent Date			
OFFICERS	S AND DIREC	rors:	ADDITIONS/CHANGES TO OFFICERS AND DIREC	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:		
Title: Name: Address: City-St-Zip:	S () ARONSON, RHO 901 E CAMINO BOCA RATON, I	REAL #12A	Title: () Change () Addition Name: Address: City-St-Zip:			
Title: Name: Address: City-St-Zip:	P () KAPLAN, BARR 901 E. CAMINO BOCA RATON, I	REAL, #10D	Title: () Change () Addition Name: Address: City-St-Zip:			
Title: Name: Address:	VPT () FELD, MAIRUTH 901 E CAMINO BOCA RATON, I	REAL #6C	Title: VP (X) Change () Addition Name: FELD, MAIRUTH Address: 901 E CAMINO REAL #6C City-St-Zip: BOCA RATON, FL 33432			
City-St-Zip:						
City-St-Zip: Title: Name: Address: City-St-Zip:	T () RONDINELLI, R 901 E CAMINO BOCA RATON, I	REAL #8D	Title: () Change () Addition Name: Address: City-St-Zip:			

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: BARRY KAPLAN PRES 04/02/2009