

FILE NOW: FILING FEE IS \$61.25

FILED

Jan 31 1997 8:00am
Secretary of State

NONPROFIT CORPORATION
ANNUAL REPORT
1997



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 752027 (3)

1. Corporation Name
CARLTON BAY CONDOMINIUM ASSOCIATION, INC.



Principal Place of Business Mailing Address
J & M MANAGEMENT 221 S.W. 22ND AVE. STE. 219 MIAMI FL 33135
J & M MANAGEMENT 221 S.W. 22ND AVE. STE. 219 MIAMI FL 33135-1544

3. Date Incorporated or Qualified 04/15/1980
3a. Date of Last Report 02/20/1996

2. Principal Place of Business 21
2a. Mailing Address 26
27
22 Suite, Apt. #, etc. 200
27 City & State
23 City & State Miami Florida
28 Zip Country
24 Zip 33130 25 Country Dade 30
A. FEI Number 59-1998418
Applied For Not Applicable
5. Certificate of Status Desired \$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution \$5.00 May Be Added to Fees
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes Yes No

9. Name and Address of Current Registered Agent
HYMAN & KAPLAN, P.A.
44 W FLAGLER STREET
14 FLOOR
MIAMI FL 33130
10. Name and Address of New Registered Agent
81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
130 W FLAGLER STREET (29 FLOOR)
83
84 City Miami FL 85 Zip Code 33130

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 registered office 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 registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

| 12. OFFICERS AND DIRECTORS | | 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 | |
|----------------------------|---|---|---|
| TITLE | D RANCE, LES 2821 N E 163RD ST APT 5 NMB FL 33160 | 1.1 TITLE | D DANIEL RICHARDO 2821 NE 163 STREET #5D No. Miami Beach, FL 33160 |
| TITLE | SD GIFFORD, EVA 2821 N E 163RD APT 2K NMB FL 33160 | 2.1 TITLE | MARGARET DUBAS 2821 NE 163 ST. #2R No. Miami Beach, FL 33160 |
| TITLE | PD LEVEQUE, GUS 2821 NE 163 STREET 5-0 N. MIAMI BEACH FL 33160 | 3.1 TITLE | |
| TITLE | TD KANE, STAN 2821 N.E. 163 ST. N. MIAMI BEACH FL 33160 | 4.1 TITLE | T WAYNE MORAIS 2821 NE 163 street #2N No Miami Beach FL 33160 |
| TITLE | D MEYERS, DORIS 2821 NE 163 ST. N. MIAMI BEACH FL 33160 | 5.1 TITLE | D AVA GIFFORD 2821 NE 163 street #2K No Miami Beach FL 33160 |
| TITLE | | 6.1 TITLE | VP James Jones 2821 NE 163 st #3J No Miami Beach FL 33160 |

14. I do 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: [Signature] REQUIRED
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date

CFR2037 (9/96)