

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
May 11, 2005 8:00 am
Secretary of State

05-11-2005 90123 047 ****61.25

DOCUMENT # 752027 1. Entity Name CARLTON BAY CONDOMINIUM ASSOCIATION, INC.					
Principal Place of Business 12323 SW 55 ST #1002 COOPER, FL 33330 US			Mailing Address 275 FONTAINE BLEAU BLVD. 200 MIAMI, FL 33172 US		
2. Principal Place of Business <i>2821 NE 163 St.</i>			3. Mailing Address <i>c/o</i>		
Suite, Apt. #, etc. 			Suite, Apt. #, etc. <i>275 Fontainebleau Blvd., Suite 200</i>		
City & State <i>No Miami Beach</i>			City & State <i>Miami, FL</i>		
Zip <i>33160</i>		Country <i>US</i>		Zip <i>33172</i>	
Country <i>US</i>		4. FEI Number 59-1998418			
5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required					
6. Name and Address of Current Registered Agent LANAMACK MANAGEMENT SERVICES 12323 SW 55TH STREET STE 1002 COOPER CITY, FL 33330			7. Name and Address of New Registered Agent Name <i>Straley P O H O, P.A.</i> Street Address (P.O. Box Number is Not Acceptable) <i>3990 Sheridan Street #109</i> City <i>Hollywood</i> FL Zip Code <i>33021</i>		
8. 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE <i>X</i> Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)					
Filing Fee is \$61.25 Due by September 7, 2005		9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees		Make check payable to Florida Department of State	
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D MARGRET, DUBAS 2821 NE 63 STREET MIAMI, FL 33172	☒ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	UP Vibeke Solomon 275 Fontainebleau Blvd. #200 Miami, FL 33172	☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P HURTADO, JESUS 275 FONTAINEBLEAU BLVD #200 MIAMI, FL 33142	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	P bus Leveque 275 Fontainebleau Blvd. #200 Miami, FL 33172	☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D SHRON, JUDY 275 FONTAINEBLEAU BLVD #200 MIAMI, FL 33172	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	D Manuel Estrela 275 Fontainebleau Blvd. #200 Miami, FL 33172	☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D AUGUSTA, LEVENENE 275 FONTAINEBLEAU BLVD #200 MIAMI, FL 33142	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	D Tomas Gutierrez 275 Fontainebleau Blvd. #200 Miami, FL 33172	☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T MORRIS, WAYNE 275 FONTAINEBLEAU BLVD #200 MIAMI, FL 33142	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	J Judith Sheldon 275 Fontainebleau Blvd. #200 Miami, FL 33172	☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P GUTTFRID, TONA S 2821 NE 163 STREET MIAMI, FL 33160	☒ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	S Margaret Dubas 275 Fontainebleau Blvd. #200 Miami, FL 33172	☐ Change ☒ Addition
12. 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 report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address with all other like empowered.					
SIGNATURE: <i>Augusta Levenene</i> SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR			5-9-05 305 947-6299 Date Daytime Phone #		

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