2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Feb 07, 2008 8:00 am
Secretary of State
02-07-2008 90018 004 ****61.25

DOCUMENT # 752027

1. Entity Name

CARLTON BAY CONDOMINIUM ASSOCIATION, INC.

Principal Place of Business	Mailing Address
2821 N E 163 ST NORTH MIAMI BEACH FL 33160 US	C/O BEST WAY PMC. 14853 NE 20TH AVE NORTH MIAMI FL 33181 US

1st MOORE CR2E037 (10/07)

2. Principal Place of Business - No P.O. Box #	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Zip / Country	Zip / Country

4. FEI Number 59-1998418 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
OTTO, PA, STRALEY 3990 SHERIDAN ST #109 HOLLYWOOD FL 33021	Name Street Address (P.O. Box Number is Not Acceptable) City **FL** Zip Code

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 _____
Signature, typed or printed name of registered agent and title, if applicable. (NOTE: Registered Agent signature not required when reinstating) DATE

FILE NOW: FEE IS $61.25
Due By May 1, 2008

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	P VIBEKE, SOLOMON ~~275 FONTAINEBLEAU BLVD #200~~ 2821 N.E. 163 ST. ~~MIAMI FL 33172~~ N. M. BEACH, FL. 33160	☐ Delete	D Amy Estrela 2821 NE 163 St. North Miami Bch FL 33160.	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	T KRISTAL, JERRY 282 NE 163 ST #5X NORTH MIAMI BEACH FL 33160	☐ Delete		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D ESTRELA, MANUEL 2821 NE 163 ST NORTH MIAMI BEACH FL 33160	☐ Delete		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D GUTFREIND ~~GUTFRIEND~~, TOMAS 2821 NE 163 ST NORTH MIAMI BEACH FL 33160	☐ Delete		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VP SHELDON, JUDITH 2821 NE 163 ST NORTH MIAMI BEACH FL 33160	☐ Delete		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	S DUBAS DUBAS, MARGARET 2821 NE 163 ST NORTH MIAMI BEACH FL 33160	☐ Delete		☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, 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: Elaine Asbury 1-25-08 3059440232.