FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT #

754133

(7)

CARBON HOUSE CONDOMINIUM ASSOCIATION, INC.

CAHH	on house condominium	I ASSOCIATION, INC.			
Principal Plac	e of Business	Mailing Address		C 40044K 60001 BYLLI BYDDY 14000 YYYDD YYY BYD BYD BYD BYD BYD BYD BYD B	II OLOH EIBU BIQU OLDH LODH
4600 S OCEAN	I BLVD	4600 S OCEAN BLVD		2. Data lacorrogated or Qualified	
HIGHLAND BCH FL 33487-5390 HIGHLAND BCH FL 33487-53			5390	3. Date Incorporated or Qualified 09/11/1980	
				4. FEI Number	Applied For
				59-2209122	Not Applicable
	Place of Business	2a. Mailing Address		5. Certificate of Status Desired	\$8.75 Additional
26 26					Fee Required
22 27		Suite, Apt. #, etc.		Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
		City & State		7. Is this nonprofit corporation a homeowners	
23		28			No
Zip	Country	Zip	Country	8. This corporation owes or has paid the curr	ent year intangible
24	25	29	30		Yes No
	9. Name and Address of Curre	nt Registered Agent	81 Name	10. Name and Address of New Registered A	Agent
001000	NOFOT		81 Name		
BONIER, ALBERT			82 Street Ad	dress (P.O. Box Number is Not Acceptable)	
4600 S OCEAN BLVD HIGHLAND BEACH FL 33487			83		
nionus	NU DEMONT PL 33407				
			84 City	FL	85 Zip Code
11. Pursuant	to the provisions of Sections 617.050	02 and 617.1508, Florida Statut	es, the above-named co	prporation submits this statement for the purpose of	changing its registered
office or i agent. I a	egistered agent, or both, in the State om familiar with, and accept the oblig	e of Florida. Such change was a pations of, Section 617.0503, Flo	authorized by the corpor orida Statutes.	progration submits this statement for the purpose of ation's board of directors. I hereby accept the appointment of the purpose of the appointment of the purpose of the pu	ointment as registered
SIGNATURE					
12.	Signature, typed or printed name of registered ag	ent and title if applicable. (NOT ID DIRECTORS	E: Registered Agent signature req		CICECTOEO IVI 40
TITLE	SD OFFICERS AIN	DELETE	13. 1.1 TITLE	ADDITIONS/CHANGES TO OFFICERS AND	Change Addition
NAME	LEAH SELTZER	A December	1.2 NAME	CENTRE IMPOUNTS	25 Orienge 20 Madellan
STREET ADORESS	4000 0 00544 545		1.3 STREET ADDRESS	4600 SO OCEAN BLUD	
CITY-ST-ZIP		35487	1.4 City-St-ZiP	HIGHLAND BEACH FL 334	187
TITLE	TD	☐ DELETE	0.4 707 5	•	Change K Addition
NAME	BOYER, ROBERT		2.2 NAME	BONYER, ALBERT 4600 SO OCEAN BLUD	
STREET ADDRESS			2.3 STREET ADDRESS	The last of the second of the	. /0
CITY-ST-ZIP	HIGHLAND BCH, FL 00000		2. 4 CITY-ST-ZIP	HIGHLAND BEACH FL 33	
TITLE	Abyrette EDVVIN	DELETE	3.1 TITLE		Change Addition
NAME CIRCET ADDRESS	CARAVETTE, FRANK 4600 S. OCEAN BLVD.		3.2 NAMÉ		
STREET ADDRESS CITY-ST-ZIP		3487	3.3 STREET ADDRESS		
TITLE	SD SD	☐ DELETE	3.4. CITY-ST-ZIP 4.1 TITLE		Change Addition
NAME	CAPUTO, ROY		4. 2 NAME		
STREET ADDRESS	4600 S OCEAN BLVD		4.3 STREET ADDRESS		
CITY-ST-ZIP	HIGHLAND BCH FL 33	487	4.4 CITY-ST-ZIP		
TITLE	D	DELETE	5.1 TITLE		Change Addition
NAME	BINSTEIN, SEYMOUR		5.2 NAME		
STREET ADDRESS	4600 SO OCEAN BLVD		5.3 STREET ADDRESS		
CITY-ST-ZIP	HIGHLAND BCH FL		5.4 CITY-ST-ZIP		
TITLE		DELETE	6.1 TITLE		Change Addition
NAME			6.2 NAME	'	

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 cath; that I am an officer or director of the corporation or the receiver of receiver of sustee 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.

Robert Boyer

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FILED

Mar 26 1998 8:00am

Secretary of State