

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 28, 2008 8:00 am
Secretary of State

04-28-2008 90408 011 ****61.25

DOCUMENT # 757116 1. Entity Name CARROTWOOD HOMEOWNERS ASSOCIATION, INC.			
Principal Place of Business 15922 CARROTWOOD CIR. DELRAY BEACH, FL 33484		Mailing Address 15922 CARROTWOOD CIR DELRAY BEACH, FL 33484 US	
2. Principal Place of Business - No P.O. Box # 15934 Carrotwood Circle		3. Mailing Address 15934 Carrotwood Circle	
Suite, Apt. #, etc. 		Suite, Apt. #, etc. 	
City & State DELRAY BEACH, FL		City & State DELRAY BEACH, FL	
Zip 33484		Zip 33484	
Country U.S.A.		Country U.S.A.	
4. FEI Number 59-2173420		Applied For <input type="checkbox"/> Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent STEWART, GEORGE 15922 CARROTWOOD CIR DELRAY BEACH, FL 33484		7. Name and Address of New Registered Agent Name RIDGLEY, BARBARA Street Address (P.O. Box Number is Not Acceptable) 15934 CARROTWOOD CIRCLE City DELRAY BEACH FL Zip Code 33484	
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>Barbara Ridgley</i> PRESIDENT <small>Signature, typed or printed name of registered agent and use if applicable.</small>		DATE 4/22/08 <small>(NOTE: Registered Agent signature required when reinstating)</small>	
Filing Fee is \$61.25 Due by May 1, 2008		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$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	T MONROE, JOE <input type="checkbox"/> Delete 2562 BREADFRUIT CIRCLE DELRAY BEACH, FL 33484	TITLE NAME STREET ADDRESS CITY-ST-ZIP	T <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition MONROE, JOE 5262 BREADFRUIT CIRCLE DELRAY BEACH, FL 33484
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P <input checked="" type="checkbox"/> Delete STEWART, GEORGE 15922 CARROTWOOD CIRCLE DELRAY BEACH, FL 33484	TITLE NAME STREET ADDRESS CITY-ST-ZIP	D <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition Medoff, Polly 15935 CARROTWOOD CIRCLE DELRAY BEACH, FL 33484
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S <input type="checkbox"/> Delete RIEGLER, DORIS 5261 BREREFRUIT CIR. DELRAY BEACH, FL 33484	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V <input type="checkbox"/> Delete RIDGLEY, BARBARA 15934 CARROTWOOD CIRCLE DELRAY BEACH, FL 33484	TITLE NAME STREET ADDRESS CITY-ST-ZIP	P <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition Ridgley, BARBARA 15934 CARROTWOOD CIRCLE DELRAY BEACH, FL 33484
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D <input type="checkbox"/> Delete TARTARO, ALMA 15939 CARROTWOOD CIRCLE DELRAY BEACH, FL 33484	TITLE NAME STREET ADDRESS CITY-ST-ZIP	V <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition TARTARO, ALMA 15939 CARROTWOOD CIRCLE DELRAY BEACH, FL 33484
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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>Barbara Ridgley</i> PRESIDENT - BARBARA RIDGLEY 4/22/08 <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #</small>			