


2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 30, 2008 8:00 am
Secretary of State

04-30-2008 90180 005 ****61.25

DOCUMENT # N02000008743	
1. Entity Name RIVER CLUB AT CARLTON CONDOMINIUM ASSOCIATION, INC.	

Principal Place of Business 7777 NORTH A-1-A VERO BEACH, FL 32963	Mailing Address 2100 WEST CYPRESS CREEK RD FORT LAUDERDALE, FL 33309
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60033272



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

02192008 Chg-NP CR2E037 (12/06)

4. FEI Number 41-2069576	Applied For <input type="checkbox"/> Not Applicable
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5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
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6. Name and Address of Current Registered Agent	
NGUYEN, DOQUYEN 2100 WEST CYPRESS CREEK ROAD FORT LAUDERDALE, FL 33309	

7. Name and Address of New Registered Agent	
Name	John E. Abdo
Street Address (P.O. Box Number is Not Acceptable)	
1350 NE 56th Street, Ste 200	
City	Ft. Lauderdale FL Zip Code 33334

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	JOHN E ABDO	04/25/08
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE		

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
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10. OFFICERS AND DIRECTORS	
TITLE	P
NAME	ABDO, JOHN E
STREET ADDRESS	1350 NORTHEAST 56TH STREET
CITY-ST-ZIP	FORT LAUDERDALE, FL 33334
TITLE	V
NAME	RICHEY, DAN
STREET ADDRESS	4889 N US 1
CITY-ST-ZIP	VERO BEACH, FL 32967
TITLE	ST
NAME	DUNN, ALEXANDRA
STREET ADDRESS	2100 WEST CYPRESS CREEK ROAD
CITY-ST-ZIP	FORT LAUDERDALE, FL 33309
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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:	JOHN E ABDO 4-28-08 772-562-9031
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR	