

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000005152

**FILED**  
**Feb 23, 2009**  
**Secretary of State**

**Entity Name:** HOMEOWNERS ASSOCIATION OF CARRIAGE LAKE AT VERO, INC.

**Current Principal Place of Business:**

333 17TH ST  
STE 2L  
VERO BEACH, FL 32960

**New Principal Place of Business:**

**Current Mailing Address:**

333 17TH ST  
STE 2L  
VERO BEACH, FL 32960

**New Mailing Address:**

**FEI Number:** 20-0059069

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

ROMANO, ALAN P  
333 17TH ST STE 2L  
VERO BEACH, FL 32960 US

**Name and Address of New Registered Agent:**

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.

SIGNATURE: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

Title: VP/D ( ) Delete  
Name: HOWELL, JOAN  
Address: 333 17TH STREET SUITE 2L  
City-St-Zip: VERO BEACH, FL 32960

Title: PD ( ) Delete  
Name: HALL, KELLY  
Address: 333 17TH ST STE 2L  
City-St-Zip: VERO BEACH, FL 32960

Title: D ( ) Delete  
Name: COHEN, MARTIN  
Address: 333 17TH ST STE 2L  
City-St-Zip: VERO BEACH, FL 32960

Title: S/D ( ) Delete  
Name: TANNER, PAUL  
Address: 333 173 STREET, STE. 26  
City-St-Zip: VERO BEACH, FL 32960

Title: D ( ) Delete  
Name: BENNETT, STEVE  
Address: 333 17TH ST, STE. 2L  
City-St-Zip: VERO BEACH, FL 32960

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: D (X) Change ( ) Addition  
Name: LEWIS, TAB  
Address: 333 17TH ST STE 2L  
City-St-Zip: VERO BEACH, FL 32960

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: PAUL TANNER

S/D

02/23/2009

Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date