

2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

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FILED
Mar 31, 2010
Secretary of State

Entity Name: CARLYLE RESIDENCES AT CELEBRATION CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

5401 S. KIRKMAN ROAD
STE. 450
ORLANDO, FL 32819

New Principal Place of Business:

Current Mailing Address:

5401 S. KIRKMAN ROAD
STE. 450
ORLANDO, FL 32819

New Mailing Address:

FEI Number: 20-8453517

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

COMMUNITY MANAGEMENT PROFESSIONALS, INC.
5401 SOUTH KIRKMAN ROAD
SUITE 450
ORLANDO, FL 32819 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: P
Name: COCKS, PHILIP A
Address: 621 SYCAMORE STREET #5202
City-St-Zip: CELEBRATION, FL 34747

Title: VP
Name: ADLER, JEFFREY
Address: 621 SYCAMORE STREET #5102
City-St-Zip: CELEBRATION, FL 34747

Title: ST
Name: WELLENDORF, CHARLES
Address: 619 FRONT STREET #3305
City-St-Zip: CELEBRATION, FL 34747

Title: D
Name: BONHAM, GEORGE
Address: 601 SYCAMORE STREET # 6306
City-St-Zip: CELEBRATION, FL 34747

Title: D
Name: NELSON, JUDITH
Address: 620 CELEBRATION AVENUE # 6203
City-St-Zip: CELEBRATION, FL 34747

I hereby 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 all other like empowered.

SIGNATURE: PHILLIP COCKS

P

03/31/2010

Electronic Signature of Signing Officer or Director

Date