

# **2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N11000007861

**FILED**  
**Feb 28, 2012**  
**Secretary of State**

**Entity Name:** CARVER HEIGHTS TOWNHOMES COMMUNITY ASSOCIATION, INC.

**Current Principal Place of Business:**

C/O MARK ANTONIO, CITY MANAGER  
400 S. FEDERAL HWY  
HALLANDALE BEACH, FL 33009

**New Principal Place of Business:**

**Current Mailing Address:**

C/O MARK ANTONIO, CITY MANAGER  
400 S. FEDERAL HWY  
HALLANDALE BEACH, FL 33009

**New Mailing Address:**

**FEI Number:** 59-6000333

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

MCKENNEY, ANDRE  
400 S. FEDERAL HWY  
HALLANDALE BEACH, FL 33009 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: PD  
Name: ANTONIO, MARK  
Address: 400 S. FEDERAL HWY  
City-St-Zip: HALLANDALE BEACH, FL 33009

Title: TD  
Name: LADOLCETTA, PATRICIA  
Address: 400 S. FEDERAL HWY  
City-St-Zip: HALLANDALE BEACH, FL 33009

Title: SD  
Name: JAMES, SHEENA  
Address: 400 S. FEDERAL HWY  
City-St-Zip: HALLANDALE BEACH, FL 33009

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: MARK ANTONIO

PD

02/28/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date