

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N12845

FILED
Mar 19, 2009
Secretary of State

Entity Name: CARRIAGE HOUSES OF FAIRFIELD ASSOCIATION, INC.

Current Principal Place of Business:

778 SOUTH MILITARY TRAIL
DEERFIELD BEACH, FL 33443 US

New Principal Place of Business:

Current Mailing Address:

PO BOX 97-0069
BOCA RATON, FL 334970069 US

New Mailing Address:

FEI Number: 65-0105491

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PALOMBI, GARY
778 SOUTH MILITARY TRAIL
DEERFIELD BEACH, FL 33442 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 () Delete
Name: GOODWIN, SUMNER
Address: 5295 BUCKHEAD CIR
City-St-Zip: BOCA RATON, FL 33486 US

Title: D () Delete
Name: BLUMBERG, STEVE
Address: 5349 BUCKHEAD CIRCLE
City-St-Zip: BOCA RATON, FL 33486

Title: D () Delete
Name: SANDAK, JEANNE
Address: 5294 BUCKHEAD CIRCLE
City-St-Zip: BOCA RATON, FL 33486

Title: S () Delete
Name: PIERCE, JOAN
Address: 5374 BUCKHEAD CIRCLE
City-St-Zip: BOCA RATON, FL 33486

Title: VPT () Delete
Name: BROWN, RUTH
Address: 5287 BUCKHEAD CIR
City-St-Zip: BOCA RATON, FL 33486

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: D (X) Change () Addition
Name: BRIGGS, RAY
Address: 5319 BUCKHEAD CIRCLE
City-St-Zip: BOCA RATON, FL 33486

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

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: GARY PALOMBI

RA

03/19/2009

Electronic Signature of Signing Officer or Director

Date