## 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N13568

FILED Jul 06, 2009 Secretary of State

Entity Name: CARMEL AT THE CALIFORNIA CLUB CONDOMINIUM "25" ASSOCIATION, INC.

Current Principal Place of Business: New Principal Place of Business:

PHOENIX MGMT STERVICES, INC. 2200 NW 102 AVENUE

4800 NORTH STATE RD. 7 5
FORT LAUDERDALE, FL 33319 US DORAL, FL 33172

Current Mailing Address: New Mailing Address:

PHOENIX MGMT STERVICES, INC. 2200 NW 102 AVENUE 4800 NORTH STATE RD. 7 5

FORT LAUDERDALE, FL 33319 US DORAL, FL 33172 US

FEI Number: 59-2717128 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

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

PHOENIX MGMT STERVICES, INC. C ARTEAGA 4800 N. STATE RD. 7 P105 2200 NW 102 A

4800 N. STATE RD. 7 P105

FORT LAUDERDALE, FL 33319

US

2200 NW 102 AVENUE
5

DORAL, FL 33172 US

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: C ARTEAGA 07/06/2009

Electronic Signature of Registered Agent Date

## OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD () Delete Title: PD (X) Change () Addition Name: MATOS, ANNA Name: PROPERTY INVESTMENTS, LEROY

 Address:
 921 NE 199 ST. #102
 Address:
 10301 SW 134 PLACE

 City-St-Zip:
 MIAMI, FL 33179
 City-St-Zip:
 MIAMI, FL 33186

Title: VPD ( ) Delete Title: VPD (X) Change ( ) Addition Name: SNYDER, BEATRICE B Name: OBAS, GAIL

 Address:
 921 NE 199ST #108
 Address:
 927 NE 199 STREET, 108

 City-St-Zip:
 MIAMI, FL 33179
 City-St-Zip:
 MIAMI, FL 33179

Title: SD () Delete Title: SD (X) Change () Addition Name: VARGAS, ELLEN Name: TROWSDALE, REINA DE ARMAS

 Address:
 921 NE 199 ST #202
 Address:
 921 NE 199 ST #106

 City-St-Zip:
 MIAMI, FL 33179
 City-St-Zip:
 MIAMI, FL 33179

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: REINA DE ARMAS TROWSDALE SEC 07/06/2009