

**2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

**FILED  
Jul 06, 2009  
Secretary of State**

DOCUMENT# N14897

**Entity Name:** CARMEL AT THE CALIFORNIA CLUB CONDOMINIUM "24" ASSOCIATION, INC.

**Current Principal Place of Business:**

901 NE 199TH ST  
MIAMI, FL 33179 US

**New Principal Place of Business:**

**Current Mailing Address:**

927 NE 199TH STREET  
#101  
MIAMI, FL 33179 US

**New Mailing Address:**

**FEI Number:** 59-2725746      **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:**

GARCIA, INGER M  
3389 SHERIDAN STREET  
546  
HOLLYWOOD, FL 33021 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: MAURICI, GIUSEPPE  
Address: 927 NE 199 ST, APT 101  
City-St-Zip: MIAMI, FL 33179

Title: VP/T ( ) Delete  
Name: DE ARMAS, REINA  
Address: 927 NE 199TH STREET, APT. 106  
City-St-Zip: MIAMI, FL 33179 US

Title: SEC ( ) Delete  
Name: OBAS, GAIL  
Address: 927 NE 199TH STREET, APT. 108  
City-St-Zip: MIAMI, FL 33179

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

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: CARLOS ARTEAGA

MGR

07/06/2009

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date