

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N23371

FILED
Jan 27, 2009
Secretary of State

Entity Name: CLAIMONT CONDOMINIUM E ASSOCIATION, INC.

Current Principal Place of Business:

GOLDMAN JUDA & MARTIN, P.A.
8211 WEST BROWARD BLVD, STE PH1 FIFTH FL
PLANTATION, FL 33324

New Principal Place of Business:

Current Mailing Address:

GOLDMAN JUDA & MARTIN, P.A.
8211 WEST BROWARD BLVD, STE PH1 FIFTH FL
PLANTATION, FL 33324

New Mailing Address:

FEI Number: 59-2843230

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CLAPNER, GLORIA
10302 E CLAIRMONT CIR
TAMARAC, FL 33321 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: T () Delete
Name: BERNSTEIN, PAUL
Address: 10304 E CLAIRMONT CIR
City-St-Zip: TAMARAC, FL 33321

Title: S () Delete
Name: CLAPNER, GLORIA
Address: 10302 E CLAIRMONT CIR
City-St-Zip: TAMARAC, FL

Title: VP () Delete
Name: MARKS, ELAINE
Address: 10320 E. CLAIRMONT CIR
City-St-Zip: TAMARAC, FL

Title: VP () Delete
Name: SCHOOR, GERT
Address: 10318 E. CLAIRMONT CIR
City-St-Zip: TAMARAC, FL

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: S (X) Change () Addition
Name: CLAPNER, GLORIA
Address: 10302 E CLAIRMONT CIR
City-St-Zip: TAMARAC, FL 33321

Title: VP (X) Change () Addition
Name: MARKS, ELAYNE
Address: 10320 E. CLAIRMONT CIR
City-St-Zip: TAMARAC, FL 33321

Title: VP (X) Change () Addition
Name: SCHOOR, GERT
Address: 10318 E. CLAIRMONT CIR
City-St-Zip: TAMARAC, FL 33321

Title: P () Change (X) Addition
Name: WEINER, NORMAN
Address: 10352 E. CLAIRMONT CIRCLE
City-St-Zip: TAMARAC, FL 33321

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: NORMAN WEINER

P

01/27/2009

Electronic Signature of Signing Officer or Director

Date