## 2008 NOT-FOR-PROFIT CORPORATION **ANNUAL REPORT**

## FILED Feb 04, 2008 8:00 am Secretary of State



DOCUMENT # N23821 02-04-2008 90062 034 \*\*\*\*61.25 CARÓLINA MAINTENANCE ASSOCIATION, INC. 4001.190-Principal Place of Business Mailing Address C/O CASTLE GROUP C/O CASTLE GROUP 12270 SW 3RD STREET P.O. BOX 559009 PLANTATION, FL 33325 PLANTATION, FL 33355-9009 US 2. Principal Place of Business - No P.O. Box # 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 01072008 Chg-NP CR2E037 (12/06) City & State City & State 4. FEI Number 65-0050284 Applied For Not Applicable Country Zip Country \$8.75 Additional 5. Certificate of Status Desired 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent TUCKER & TIGHE, P.A. 800 EAST BROWARD BOULEVARD, SUITE 710 Box Number is Not Acceptable) FORT LAUDERDALE, FL 33301 amato Rd. Suite41 ent for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept 8. The above named entity subthe obligations of registered age SIGNATURE ofe, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) Filing Fee is \$61.25 9. Election Campaign Financing \$5.00 May Be Make check payable to Trust Fund Contribution. Florida Department of State Due by May 1, 2008 Added to Fees OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 10. 11. PD TITLE ☐ Delete TITLE ☐ Addition BENOIT, JANIS NAME NAME 3441 GREENVIEW TERRACE W. STREET ADDRESS STREET ADDRESS CITY-ST-ZIP MARGATE, FL CITY-ST-ZIP D TITLE ☐ Delete ☐ Addition ☐ Change POLETTI, KEVIN NAME NAME STREET ADDRESS 7441 NW 29TH ST STREET ADDRESS CITY-ST-ZIP MARGATE, FL 33063 CITY-ST-Z-P SD-----☐ Delete TITLE TITLE ☐ Change ☐ Addition NAME MORITT, JANET NAME STREET ADDRESS 7696 HIGHLANDS CIRCLE STREET ADORESS MARGATE, FL 33063 CITY-ST-ZIP CITY-ST-ZIP TITI F TD ☐ Delete ☐ Change ■ Addition THIE PITTERSON, JANET NAME NAME STREET ADDRESS 2060 BAYBERRY WAY STREET ADDRESS CITY-ST-ZIP MARGATE, FL 33063 CITY-ST-7IP ☐ Delete TITLE □ Change ☐ Addition TITLE BARTLETT, CAROLE NAME 2905 NW 70TH AVE STREET ADDRESS STREET ADDRESS CITY-ST-ZIP MARGATE, FL 33063 CITY-ST-ZIP ☐ Delete ■ Addition ☐ Change STREET ADDRESS STREET ADDRESS CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if chapter of the property of the of the corporation or the receiver or trustee empowered to changed, or on an attachment with an address, with all of empowered.

SIGNATURE: