

**2008 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT****FILED**  
**Apr 24, 2008**  
**Secretary of State**

DOCUMENT# N23821

**Entity Name:** CAROLINA MAINTENANCE ASSOCIATION, INC.**Current Principal Place of Business:**C/O CASTLE GROUP  
12270 SW 3RD STREET  
PLANTATION, FL 33325 US**Current Mailing Address:**C/O CASTLE GROUP  
P.O. BOX 559009  
PLANTATION, FL 333559009 US**New Principal Place of Business:**C/O INTEGRITY PROPERTY MGMT. INC.  
953 UNIVERSITY DRIVE  
CORAL SPRINGS, FL 33071 US**New Mailing Address:**C/O INTEGRITY PROPERTY MGMT. INC.  
953 UNIVERSITY DRIVE  
CORAL SPRINGS, FL 33071 US**FEI Number:** 65-0050284**FEI Number Applied For ( )****FEI Number Not Applicable ( )****Certificate of Status Desired ( )****Name and Address of Current Registered Agent:**SACHS & SAX P.A.  
301 YAMATO RD  
SUITE 4150  
BOCA RATON, FL 33431 US**Name and Address of New Registered Agent:**INTEGRITY PROPERTY MGMT. INC.  
953 UNIVERSITY DRIVE  
CORAL SPRINGS, FL 33071 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. ERIC WHITTLE

04/24/2008

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**Title: PD ( ) Delete  
Name: BENOIT, JANIS  
Address: 3441 GREENVIEW TERRACE W.  
City-St-Zip: MARGATE, FLTitle: D ( ) Delete  
Name: POLETTI, KEVIN  
Address: 7441 NW 29TH ST  
City-St-Zip: MARGATE, FL 33063Title: SD ( ) Delete  
Name: MORITT, JANET  
Address: 7696 HIGHLANDS CIRCLE  
City-St-Zip: MARGATE, FL 33063Title: TD ( ) Delete  
Name: PITTERSON, JANET  
Address: 2060 BAYBERRY WAY  
City-St-Zip: MARGATE, FL 33063Title: V ( ) Delete  
Name: BARTLETT, CAROLE  
Address: 2905 NW 70TH AVE  
City-St-Zip: MARGATE, FL 33063**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: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: JANIS BENOIT

PD

04/24/2008

Electronic Signature of Signing Officer or Director

Date