

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N25549

FILED
Apr 17, 2007
Secretary of State

Entity Name: CARMEL OF BRYN-MAWR CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

28100 US 19 N. #305
CLEARWATER, FL 32761 US

New Principal Place of Business:

Current Mailing Address:

28100 US 19 N. #305
CLEARWATER, FL 32761 US

New Mailing Address:

FEI Number: 59-3086714 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

REINHARDT, DEBRA
28100 US 19 N. #305
CLEARWATER, FL 32761 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: DP () Delete
Name: PALMER, JOHN
Address: 2749 COUNTRYSIDE BLVD., #17
City-St-Zip: CLEARWATER, FL 33761

Title: DS () Delete
Name: MUNNS, VIRGINIA
Address: 2749 COUNTRYSIDE BLVD, #26
City-St-Zip: CLEARWATER, FL 33761

Title: T () Delete
Name: LAKIN, ALLAN
Address: 2749 COUNTRYSIDE BLVD #13
City-St-Zip: CLEARWATER, FL 33761

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

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: DVP (X) Change () Addition
Name: LAKIN, ALLAN
Address: 2749 COUNTRYSIDE BLVD #13
City-St-Zip: CLEARWATER, FL 33761

Title: DT () Change (X) Addition
Name: LAKIN, ALLAN
Address: 2749 COUNTRYSIDE BLVD #13
City-St-Zip: CLEARWATER, FL 33761

I hereby certify that the information supplied with this filing does not qualify for the 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: JOHN PALMER

DP

04/17/2007

Electronic Signature of Signing Officer or Director

_____ Date