

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N30230

FILED
Jan 27, 2009
Secretary of State

Entity Name: CLAIMONT CONDOMINIUM G ASSOCIATION, INC.

Current Principal Place of Business:

C/O JACK BRILL
10720 W. CLAIMONT CIR
TAMARAC, FL 33321

New Principal Place of Business:

Current Mailing Address:

C/O JACK BRILL
10720 W. CLAIMONT CIR
TAMARAC, FL 33321

New Mailing Address:

FEI Number: 59-0092304

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BRILL, JACK
10720 W CLAIMONT 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: PD () Delete
Name: BRILL, JACK,
Address: 10720 W. CLAIMONT CIR
City-St-Zip: TAMARAC, FL

Title: TD () Delete
Name: SCHLIEFER, ESTY
Address: 10732 W. CLAIMONT CIRCLE
City-St-Zip: TAMARAC, FL 33321

Title: D (X) Delete
Name: SCHNUR, LOUIS
Address: 10718 W CLAIMONT CIR
City-St-Zip: TAMARAC, FL

Title: VPD () Delete
Name: COHEN, GEORGE
Address: 10744 W. CLAIMONT CIR
City-St-Zip: TAMARAC, FL 33321

Title: SD () Delete
Name: TABAKIN, GIL
Address: 10730 W. CLAIMONT CIRCLE
City-St-Zip: TAMARAC, FL 33321

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: BRILL, JACK,
Address: 10720 W. CLAIMONT CIR
City-St-Zip: TAMARAC, FL 33321

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: JACK BRILL

PD

01/27/2009

Electronic Signature of Signing Officer or Director

Date