2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
May 04, 2006 8:00 am
Secretary of State
05-04-2006 90211 013 ****61.25

DOCUMENT # N32153

1. Entity Name
CLAIRMONT CONDOMINIUM N ASSOCIATION, INC.

Principal Place of Business	Mailing Address
C/O MARION STERN 10959 WEST CLAIRMONT CIRCLE TAMARAC, FL 33321 US	C/O MARION STERN 10959 WEST CLAIRMONT CIRCLE TAMARAC, FL 33321 US

2. Principal Place of Business	3. Mailing Address
c/o GOLDMAN JUDA 8211 W. BROWARD BLVD	c/o GOLDMAN JUDA 8211 W. BROWARD BLVD
Suite, Apt. #, etc. SUITE PH-1	Suite, Apt. #, etc. PH-1
City & State PLANTATION FL	City & State PLANTATION FL
Zip / Country 33324 / USA	Zip / Country 33324 / USA

4UU03483

02212006 Chg-NP CR2E037 (11/05)

4. FEI Number
65-0138506
☐ Applied For
☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
STERN, MARION 10959 W CLAIRMONT CIRCLE TAMARAC, FL 33321	Name c/o GOLDMAN, JUDA P.A. KIM JUDA Street Address (P.O. Box Number is Not Acceptable) 8211 W. BROWARD BLVD., SUITE PH-1 City PLANTATION FL Zip Code 33324

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE Kimberly A Juda 4/10/06
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

Filing Fee is $61.25
Due by May 1, 2006

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

Make check payable to Florida Department of State

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	S LEWIS, JERRY 10963 W CLAIRMONT CIR TAMARAC, FL	☒ Delete	P Roy TABICMAN 10941 W. CLAIRMONT CIRCLE TAMARAC, FL 33321	☐ Change ☑ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D KALINSKY, HANNAH 10931 WEST CLAIRMONT CIRCLE TAMARAC, FL 33321	☒ Delete	VP MILDRED SOKOL 10919 W. CLAIRMONT CIRCLE TAMARAC, FL 33321	☐ Change ☑ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D KALINSKY, JOSPEH 10931 W CLAIRMONT CIRCLE TAMARAC, FL	☒ Delete	T CECILE GANJOIN 10921 W. CLAIRMONT CIRCLE TAMARAC, FL 33321	☐ Change ☑ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PD STERN, MARION 10959 WEST CLAIRMONT CIRCLE TAMARAC, FL 33321	☒ Delete	S BARRY SOKOL 10919 W. CLAIRMONT CIRCLE TAMARAC, FL 33321	☐ Change ☑ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	D DAVID JASPAN 10935 W. CLAIRMONT CIRCLE TAMARAC, FL 33321	☐ Change ☑ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete		☐ Change ☐ Addition

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 changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Kay Blue Allen 4-10-06 954-577-9700
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #