


**2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

**FILED**  
**Jan 31, 2005 08:00 AM**  
**Secretary of State**

**DOCUMENT # N37856**  
 1. Entity Name  
**CLAIREMONT VILLAGE, A CONDOMINIUM, INC.**



Principal Place of Business      Mailing Address  
**2050 N.E. 140 ST., #10**      **2050 N.E. 140 ST., #10**  
**NORTH MIAMI BEACH, FL 33181 US**      **NORTH MIAMI BEACH, FL 33181 US**

**DO NOT WRITE IN THIS SPACE**



01052005 No Chg-NP      CR2E037 (10/03)

4. FEI Number      Applied For  
**65-0266184**      Not Applicable

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

6. Name and Address of Current Registered Agent  
**PHILLIPS, SUSANNE**  
**2050 N.E. 140 ST., #10**  
**NORTH MIAMI BEACH, FL 33181**

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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 \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating)      DATE \_\_\_\_\_

**Filing Fee is \$61.25**  
**Due by May 1, 2005**

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

10. OFFICERS AND DIRECTORS

TITLE	PD
NAME	GALVIS, WILLIAM
STREET ADDRESS	2050 N.E. 140 ST., #20
CITY-ST-ZIP	N MIAMI BEACH, FL 33181
TITLE	TD
NAME	PHILLIPS, SUSANNE
STREET ADDRESS	2050 N.E. 140 ST., #10
CITY-ST-ZIP	N. MIAMI BEACH, FL 33181
TITLE	VPD
NAME	STRACKMAN, KEN
STREET ADDRESS	2050 N.E. 140 ST., #8
CITY-ST-ZIP	MIAMI, FL 33166
TITLE	TC
NAME	BRAVO, PILAR
STREET ADDRESS	2050 N.E. 140 ST., #3
CITY-ST-ZIP	MIAMI, FL 33181
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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1100000207534  
 02/01/05-80049-010 70.00

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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: Susanne Phillips      Susanne Phillips      01-28-2005  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR      Date      Daytime Phone #