

# **2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N40459

**FILED**  
**Jan 27, 2011**  
**Secretary of State**

**Entity Name:** CARLTON PLACE OF PELICAN BAY CONDOMINIUM ASSOCIATION, INC.

**Current Principal Place of Business:**

5435 JAEGER ROAD #4  
NAPLES, FL 34109 US

**New Principal Place of Business:**

**Current Mailing Address:**

5435 JAEGER ROAD #4  
NAPLES, FL 34109 US

**New Mailing Address:**

**FEI Number:** 65-0230297

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

NEWELL, WILLIAM A  
5435 JAEGER ROAD #4  
NAPLES, FL 34109 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  
Name: MCMILLAN, WILLIS  
Address: 362 CARLTON PLACE  
City-St-Zip: NAPLES, FL 34108

Title: VD  
Name: GEORGIEFF, GREG  
Address: 390 CARLTON PLACE  
City-St-Zip: NAPLES, FL 34108

Title: TD  
Name: BRAMSON, LIBBIE  
Address: 353 CARLTON PLACE  
City-St-Zip: NAPLES, FL 34108

Title: SD  
Name: WIGGINS, JIM  
Address: 343 CARLTON PLACE  
City-St-Zip: NAPLES, FL 34108

Title: D  
Name: DAVIS, JOSEPH  
Address: 363 CARLTON PLACE  
City-St-Zip: NAPLES, FL 34108

I hereby 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 all other like empowered.

SIGNATURE: WILLIS MCMILLAN

PD

01/27/2011

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date