

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N43553

FILED  
Apr 29, 2009  
Secretary of State

**Entity Name:** CARROLLTON HOMEOWNERS' ASSOCIATION, INC.

**Current Principal Place of Business:**

15312 CARROLLTON LANE  
TAMPA, FL 336242200 US

**New Principal Place of Business:**

**Current Mailing Address:**

15312 CARROLLTON LANE  
TAMPA, FL 336242200 US

**New Mailing Address:**

**FEI Number:** 59-3220679

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

SCHWANKE, TIM  
15312 CARROLLTON LANE  
TAMPA, FL 33624 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: LAVALLEE, JIM  
Address: 15407 CARROLLTON LANE  
City-St-Zip: TAMPA, FL 33624

Title: DV ( ) Delete  
Name: KENT, ANGELA  
Address: 15411 CARROLLTON LANE  
City-St-Zip: TAMPA, FL 33624

Title: DS ( ) Delete  
Name: SCHWANTKE, TIM  
Address: 15312 CARROLLTON LANE  
City-St-Zip: TAMPA, FL 33624

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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: TIM SCHWANKE

D

04/29/2009

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

\_\_\_\_\_  
Date