2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N93000004413

FILED Feb 04, 2009 Secretary of State

Entity Name: CARLTON RANCHES HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business: New Principal Place of Business: BROCK MANAGEMENT/11606 NW 19TH DRIVE 11606 NW 19TH DRIVE CORAL SPRINGS, FL 33071 CORAL SPRINGS, FL 33071 US **Current Mailing Address: New Mailing Address:** PO BOX 770850 POMPANO BEACH, FL 33077 US FEI Number: 65-0543463 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: BROCK, JANE 11606 N W 19TH DRIVE CORAL SPRINGS, FL 33071 US 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:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Delete () Change () Addition ANNUNZIATH, FRED Name: Name: 3501 FAIRFAX LANE Address: Address: City-St-Zip: **DAVIE, FL 33330** City-St-Zip: Title: Title: () Delete () Change () Addition Name: ADAMS, BEN Name: Address: 14025 CARLTON DR Address: City-St-Zip: **DAVIE, FL 33330** City-St-Zip: Title: () Delete Title: () Change () Addition GRIFFIS, PAM Name: Name: Address: 14100 CARLTON DRIVE Address: City-St-Zip: **DAVIE. FL 33330** City-St-Zip: Title: () Delete Title: () Change () Addition Name: JONES, MICHAEL Name: Address: 83825 CARLTON DR Address: City-St-Zip: **DAVIE, FL 33330** City-St-Zip: Title: () Delete Title: () Change () Addition GUARIO, LOUIS Name: Name: 14050 CARLTON DRIVE Address: Address: **DAVIE, FL 33330** City-St-Zip: 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: FRED ANNUNZIATH P 02/04/2009