

# 2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

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FILED  
Apr 22, 2011  
Secretary of State

**Entity Name:** CARLTON LAKES MASTER ASSOCIATION, INC.

**Current Principal Place of Business:**

C/O GULF BREEZE MGT SVCS OF SW FL, LLC  
8910 TERRENE COURT, SUITE 200  
BONITA SPRINGS, FL 34135

**New Principal Place of Business:**

**Current Mailing Address:**

C/O GULF BREEZE MGT SVCS OF SW FL, LLC  
8910 TERRENE COURT, SUITE 200  
BONITA SPRINGS, FL 34135

**New Mailing Address:**

**FEI Number:** 65-0720332

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

WEIDNER, RALPH L  
%GULF BREEZE MGMT. SVCS. OF SW FL, LLC  
8910 TERRENE COURT, SUITE 200  
BONITA SPRINGS, FL 34135 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: SD  
Name: LITTMAN, DEBORAH  
Address: 5135 CEDAR SPRINGS DRIVE, #204  
City-St-Zip: NAPLES, FL 34110

Title: D  
Name: SCHROEDER, THOMAS V  
Address: 5640 NORTHBORO DRIVE, #102  
City-St-Zip: NAPLES, FL 34110

Title: VD  
Name: GREENBERG, WILLIAM  
Address: 6095 MANCHESTER PLACE  
City-St-Zip: NAPLES, FL 34110

Title: TD  
Name: MOUSA, BRUCE  
Address: 5645 NORTHBORO DRIVE, #101  
City-St-Zip: NAPLES, FL 34110

Title: D  
Name: PALICIA, WAYNE  
Address: 5605 SHERBORN DRIVE, #102  
City-St-Zip: NAPLES, FL 34110

Title: PD  
Name: RUBINOFF, MIKE  
Address: 4950 DEERFIELD WAY, #201  
City-St-Zip: NAPLES, FL 34110

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: MIKE RUBINOFF

PRES

04/22/2011

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

\_\_\_\_\_  
Date