


2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 12, 2006 08:00 AM
Secretary of State

DOCUMENT # 766268
 1. Entity Name
 CASA ESTAMAR CONDOMINIUM ASSOCIATION, INC.



Principal Place of Business Mailing Address
 1249 SE 8TH ST APT #3 1249 SE 8TH ST APT #3
 CAPE CORAL, FL 33990 CAPE CORAL, FL 33990

DO NOT WRITE IN THIS SPACE



01082006 No Chg-NP CR2E037 (11/05)

4. FEI Number Applied For
 NOT APPLICABLE Not Applicable

5. Certificate of Status Desired \$6.75 Additional Fee Required

6. Name and Address of Current Registered Agent
 BAKOS, ROSE
 1249 SE 8TH ST APT #3
 CAPE CORAL, FL 33990

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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 Rosemarie Bakos DATE 1-10-06
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when relocating.)

Filing Fee is \$61.25
Due by May 1, 2006

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

10. OFFICERS AND DIRECTORS

TITLE	STD
NAME	SHAHID, RASOOL
STREET ADDRESS	1245 SE 8TH ST APT #F
CITY - ST - ZIP	CAPE CORAL, FL
TITLE	PD
NAME	BAKOS, ROSE
STREET ADDRESS	1249 SE 8TH ST APT 3
CITY - ST - ZIP	CAPE CORAL, FL
TITLE	VO
NAME	BAKOS, JOHN
STREET ADDRESS	1249 SE 8TH ST APT 3
CITY - ST - ZIP	CAPE CORAL, FL
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	

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 01/13/06-80021-013 61.25

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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 Rosemarie Bakos ROSEMARIE BAKOS DATE 1-10-06 DAYTIME PHONE # 239-772-5924
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR