

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N00000002991

FILED
Apr 13, 2005
Secretary of State

Entity Name: CASA EOLA CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

5695 BEGGS ROAD
STE B-100
ORLANDO, FL 32810

New Principal Place of Business:

107 N. LINE DR.
APOPKA, FL 32703 US

Current Mailing Address:

5695 BEGGS ROAD
STE B-100
ORLANDO, FL 32810

New Mailing Address:

107 N. LINE DR.
APOPKA, FL 32703 US

FEI Number: 59-3697116

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SUTHERLAND, THERESA D
5695 BEGGS ROAD
STE B-100
ORLANDO, FL 32810 US

Name and Address of New Registered Agent:

SUTHERLAND, THERESA D
107 N. LINE DR.
APOPKA, FL 32703 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: THERESA SUTHERLAND

04/13/2005

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: GIBSON, MICHAEL
Address: 604 E. LIVINGSTON STREET, #2
City-St-Zip: ORLANDO, FL 32803

Title: SD () Delete
Name: SKALDE, JARROD
Address: 350 W. PIERPONT AVENUE, W-111
City-St-Zip: SALT LAKE CITY, UT 84101

Title: VD () Delete
Name: SERBIN, TAD
Address: 511 WOODLAWN BLVD.
City-St-Zip: ORLANDO, FL 32801

Title: TD (X) Delete
Name: GRADY, TYLER
Address: 1610 MOHAWK TRAIL
City-St-Zip: MAITLAND, FL 32751

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: GIBSON, MICHAEL H
Address: 604 E. LIVINGSTON STREET, #2
City-St-Zip: ORLANDO, FL 32803 US

Title: VD (X) Change () Addition
Name: WILE, CHERIE
Address: 337 CATHCART AVE.
City-St-Zip: ORLANDO, FL 32803 US

Title: SD (X) Change () Addition
Name: O'MALLEY, SHAWN
Address: 606 E. LIVINGSTON ST.
City-St-Zip: ORLANDO, FL 32803 US

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: MICHAEL GIBSON

PD

04/13/2005

Electronic Signature of Signing Officer or Director

Date