

**FILE NOW: FILING FEE IS \$61.25**

NONPROFIT CORPORATION ANNUAL REPORT 1996



FLORIDA DEPARTMENT OF STATE  
Sandra B. Morham  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # **N00386** (5)  
1. Corporation Name  
**CASA LINDA TOWNHOMES CONDOMINIUM ASSOCIATION, INC.**



Principal Place of Business Mailing Address  
**5915 WEST 16TH LANE HIALEAH FL 33012**  
**C/O TROPICANA REALTY INC 3742 W 12 AVE HIALEAH FL 33012 US**

3. Date Incorporated or Qualified **12/16/1983** 3a. Date of Last Report Applied For **04/14/1995**  
4. FEI Number **59-2401307** Applied For Not Applicable  
5. Certificate of Status Desired  **\$8.75 Additional Fee Required**  
6. Election Campaign Financing Trust Fund Contribution  **\$5.00 May Be Added to Fees**  
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes  Yes  No

2. Principal Place of Business 2a. Mailing Address  
21 Suite, Apt. #, etc. 26 Suite, Apt. #, etc.  
22 City & State 27 City & State  
23 Zip Country 28 Zip Country  
24 25 29 30

9. Name and Address of Current Registered Agent  
**HERNANDEZ HENRY TROPICANA REALTY INC HIALEAH FL 33012**

10. Name and Address of New Registered Agent  
81 Name  
82 Street Address (P.O. Box Number is Not Acceptable)  
83  
84 City **FL** 85 Zip Code

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE Signature typed or printed name of registered agent and the corporation (NOTE: Registered Agent Signature required when filing this form) DATE

12. OFFICERS AND DIRECTORS

TITLE	PD	<input type="checkbox"/> DELETE
NAME	DE LA CRUZ, HECTOR	
STREET ADDRESS	5947 W 16 LN	
CITY-ST-ZIP	HIALEAH FL	
TITLE	<del>TD</del>	<input type="checkbox"/> DELETE
NAME	<del>SOSA, ANGE</del>	
STREET ADDRESS	<del>5927 W 16 LN</del>	
CITY-ST-ZIP	<del>HIALEAH FL</del>	
TITLE	SD	<input type="checkbox"/> DELETE
NAME	MERCHANT, MARIA G.	
STREET ADDRESS	5911 W 16 LN	
CITY-ST-ZIP	HIALEAH FL	
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS, CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
12 NAME		
13 STREET ADDRESS		
14 CITY-ST-ZIP		
21 TITLE	T/D	<input type="checkbox"/> Change <input type="checkbox"/> Addition
22 NAME	SOSA, ANGEL	
23 STREET ADDRESS	5927 WEST 16 LANE	
24 CITY-ST-ZIP	HIALEAH, FL. 33012	
31 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
32 NAME		
33 STREET ADDRESS		
34 CITY-ST-ZIP		
41 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
42 NAME		
43 STREET ADDRESS		
44 CITY-ST-ZIP		
51 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
52 NAME		
53 STREET ADDRESS		
54 CITY-ST-ZIP		
61 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
62 NAME		
63 STREET ADDRESS		
64 CITY-ST-ZIP		

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: *Rosa P. Sosa*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/15/95 (305) 568-9826  
Date: Date of Filing

CR2E037 (12/95)