


2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # N00386 1. Entity Name CASA LINDA TOWNHOMES CONDOMINIUM ASSOCIATION, INC.	
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FILED

05 JAN 19 PM 4:18

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Principal Place of Business 5903 WEST 16 LN HIALEAH, FL 33013	Mailing Address C/O AMERICA F&H MGT. & REALTY INC. 2011 W. 62 ST. HIALEAH, FL 33016 US
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2. Principal Place of Business	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Zip	Country

12022004 Chg-NP CR2E037 (10/03)

4. FEI Number 59-2401307	Applied For
	Not Applicable

5. Certificate of Status Desired **\$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
HERNANDEZ, HENRY AMERICA MANAGEMENT & REALTY INC. 2011 WEST 62 STREET HIALEAH, FL 33016	Name Street Address (P.O. Box Number is Not Acceptable) City
	State FL Zip Code

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 _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

Amended AR is \$61.25	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>	\$5.00 May Be Added to Fees
Make check payable to Florida Department of State		

10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD HERNANDEZ, REYNALDO 5919 W 16 LANE HIALEAH, FL 33012	<input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP
			PD Gonzalez, Virginia 5903 West 16 Lane Hialeah, FL 33016
			<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
			TITLE NAME STREET ADDRESS CITY-ST-ZIP
			TD GONZALEZ, VIRGINIO 5903 WEST 16 LANE HIALEAH, FL 33012
			<input checked="" type="checkbox"/> Delete
			TD Sosa, Angel 5927 West 16 Lane Hialeah, FL 33016
			<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
			TITLE NAME STREET ADDRESS CITY-ST-ZIP
			SD SOSA, ANGEL 5927 WEST 16 LANE HIALEAH, FL 33012
			<input checked="" type="checkbox"/> Delete
			SD Garcia, Roberto 5955 West 16 Lane Hialeah, FL 33016
			<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
			TITLE NAME STREET ADDRESS CITY-ST-ZIP
			<input type="checkbox"/> Delete
			TITLE NAME STREET ADDRESS CITY-ST-ZIP
			<input type="checkbox"/> Delete
			TITLE NAME STREET ADDRESS CITY-ST-ZIP
			<input type="checkbox"/> Delete
			TITLE NAME STREET ADDRESS CITY-ST-ZIP
			<input type="checkbox"/> Delete

12. I hereby certify that the information supplied with this filing does not qualify 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 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: Virginia Gonzalez
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date _____ Daytime Phone # _____