


2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 23, 2007 08:00 A
Secretary of State

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| DOCUMENT # N18705 1. Entity Name CLUB LA COSTA HOMEOWNERS ASSOCIATION, INC. |  |
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| Principal Place of Business 13250 SW 135 AVE MIAMI, FL 33186 US | Mailing Address 13250 SW 135 AVE MIAMI, FL 33186 US |
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DO NOT WRITE IN THIS SPACE



03122007 No Chg-NP CR2E037 (4/06)

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| 4. FEI Number 65-0026516 | Applied For Not Applicable |
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| 5. Certificate of Status Desired <input checked="" type="checkbox"/> \$8.75 Additional Fee Required |
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| 6. Name and Address of Current Registered Agent SKRLD, INC. 201 ALHAMBRA CIRCLE, SUITE 1102 CORAL GABLES, FL 33134 |
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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 _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE Registered Agent signature required when reinstating)

Filing Fee is \$61.25
Due by May 1, 2007

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| 9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> | \$5.00 May Be Added to Fees |
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| 10. OFFICERS AND DIRECTORS | |
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| TITLE NAME STREET ADDRESS CITY-ST-ZIP | PD EDWARDS, BRAD 8414 SW 208 ST MIAMI, FL 33189 |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | SD BAER, ROBERT 8401 SW 209 ST MIAMI, FL 33189 |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | VP IRIZARRY, WILLIAM 20994 SW 34 AVE MIAMI, FL 33189 |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | D BRUNT, SAMUEL 8408 SW 208 ST MIAMI, FL 33189 |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | TD GATES, THOMAS 8415 SW 208 TERRACE MIAMI, FL 33189 |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | |

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03/30/07-80094-011 70.00

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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: E. Brad Edwards Pres. E. Brad Edwards 3-20-07 305-254-3888
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #