2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

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

DOCUMENT # N22474

1. Entity Name
LA SAL MOTEL CONDOMINIUM ASSOCIATION, INC.

Principal Place of Business	Mailing Address
530 MANDALAY AVENUE CLEARWATER BEACH, FL 33767	530 MANDALAY AVENUE CLEARWATER BEACH, FL 33767

DO NOT WRITE IN THIS SPACE

03172007 No Chg-NP CR2E037 (4/06)

4. FEI Number
59-2852132

☐ Applied For
☐ Not Applicable

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

6. Name and Address of Current Registered Agent

KANS, BRENDA
2181 CHANTILLY LANE
DUNEDIN, FL 34698

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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

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

000000677221
03/30/07-80095-021 61.25

10. OFFICERS AND DIRECTORS

TITLE	PD
NAME	HAYDON, CHARLES R
STREET ADDRESS	1601 DRUID RD
CITY-ST-ZIP	CLEARWATER, FL 33756
TITLE	SD
NAME	KOENIG, NORBET
STREET ADDRESS	44 EILEEN AVENUE
CITY-ST-ZIP	PLAINVIEW, NY 11803
TITLE	TD
NAME	KANS, BRENDA
STREET ADDRESS	2181 CHANTILLY LANE
CITY-ST-ZIP	DUNEDIN, FL 34698
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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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: Brenda Kans Brenda Kans 3/17/07 727-785-6603
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #