

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 26, 2004 8:00 am
Secretary of State

03-26-2004 90012 048 ****61.25

DOCUMENT # N46625

1. Entity Name
CASA DEL MAR COMMUNITY ASSOCIATION, INC.



Principal Place of Business
**13451 MCGREGOR BOULEVARD
SUITE 32
FT MYERS, FL 33919 US**

Mailing Address
**13451 MCGREGOR BOULEVARD
SUITE 32
FT MYERS, FL 33919 US**

54022703



2. Principal Place of Business

3. Mailing Address

PO BOX 100831

Suite, Apt. #, etc.

Suite, Apt. #, etc.

02172004 Chg-NP CR2E037 (10/03)

City & State

City & State
Cape Coral FL

4. FEI Number
65-0307529

Applied For
Not Applicable

Zip

Country

Zip

Country

33910

USA

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

**CAMPBELL, PHILIP
1342 S.E. 46TH LANE
CAPE CORAL, FL 33904**

Name **CAMPBELL, PHILIP**
Street Ac **Professionally Yours, Inc.**
1342 SE 46TH LANE, #3
City **CAPE CORAL, FL 33904**

8. The above named entity submits this statement for the purpose of changing its registered office or for the purpose of changing its registered agent, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**Filing Fee is \$61.25
Due by May 1, 2004**

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$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
**DVS
SIUDA, ROBERT
569 INTERSTATE BLVD
SARASOTA, FL 34240** ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**V
JEFFRIES, JIM
569 INTERSTATE BLVD
SARASOTA, FL 34240** ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
VD ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**VST
COLES, CHRISTIE
569 INTERSTATE BLVD
SARASOTA, FL 34240** ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
STD ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**PD
CARPENTER, M
569 INTERSTATE BLVD
SARASOTA, FL 34240** ☐ Change ☒ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

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: *Philip Campbell*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

March 9, 2004
Date

Daytime Phone #