## **2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

## Feb 22, 2007 8:00 am **Secretary of State** DOCUMENT # N95000004051 02-22-2007 90010 011 \*\*\*\*70.00 CASA GRANDE PROPERTY OWNERS ASSOCIATION. INC. Principal Place of Business Mailing Address 40022716 C/O LANG MANAGEMENT C/O LANG MANAGEMENT 21045 COMMERCIAL TRAIL 21045 COMMERCIAL TRAIL BOCA RATON, FL 33486 BOCA RATON, FL 33486 2. Principal Place of Business - No P.O. Box # 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 01252007 Chg-NP CR2E037 (12/06) City & State 4. FEI Number 65-0645994 City & State Applied For Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent ISAACSON, WILLIAM K 21045 COMMERCIAL TRL Street Address (P.O. Box Number is Not Acceptable) BOCA RATON, FL 33486 Zip Code FL 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 Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE 9. Election Campaign Financing Make check payable to Filing Fee is \$61.25 \$5.00 May Be Trust Fund Contribution. Florida Department of State Due by May 1, 2007 Added to Fees 10. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 PD TITLE ☐ Detete TITLE ☐ Addition KLEIN, HARVEY NAME NAME 6687 CASA GRANDE WAY STREET ADDRESS STREET ADDRESS DELRAY BEACH, FL 33446 CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE ☐ Change ☐ Addition ZITLE RIPPNER, LOUIS NAME NAME STREET ADDRESS 6748 CASA GRANDE WAY STREET ADDRESS DELRAY BEACH, FL 33446 CITY-ST-ZIP CITY-ST-ZIP VP Delete TITLE ☐ Change ☐ Addition TITLE NACHMAN, LES NAME NAME STREET ADDRESS 6730 CASA GRANDE WAY STREET ADDRESS DELRAY BEACH, FL 33446 CITY-ST-ZIP CITY-ST-ZIP ☐ Delete ☐ Change ☐ Addition TITLE TITLE ANTENBERG, BRUCE NAME NAME 6718 CASA GRANDE WAY STREET ADDRESS STREET ADDRESS DELRAY BEACH, FL 33446 CITY-ST-ZIP CETY-ST-ZIP ☐ Change Addition ☐ Delete TITLE TITLE CASTER, MILTON DR NAME NAME 6802 CASA GRANDE WAY STREET ADDRESS STREET ADDRESS DELRAY BEACH, FL 33446 CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE ☐ Change ☐ Addition TITLE VON GONTEN, CAROL NAME NAME 6681 CASA GRANDE WAY STREET ADDRESS STREET ADDRESS CITY-ST-ZIP DELRAY BEACH, FL 33446 CITY-ST-ZIP

I hereby certify that the information supplied with this filling 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.

RIGNATURE AND TYPED OR PRIN ME OF BIGNING OFFICER OR DIRECTOR

**FILED** 

Daytime Phone #