## 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N0000007659

FILED Jan 15, 2007 Secretary of State

Entity Name: LA CASCADE CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business: New Principal Place of Business:

2641 EAST ATLANTIC BLVD SUITE 310 POMPANO BEACH, FL 33062

Current Mailing Address: New Mailing Address:

P.O. BOX 802 POMPANO BEACH, FL 33061

FEI Number: 65-1101469 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

TMG MANAGEMENT 2641 EAST ATLANTIC BLVD SUITE 310 POMPANO BEACH, FL 33062 US

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.

SIGNATURE:

- Flateria Circular de Paritar de Arrad

Electronic Signature of Registered Agent

Date

## **OFFICERS AND DIRECTORS:**

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD ( ) Delete Title: PD (X) Change ( ) Addition Name: MOEDER, ANITA Name: ZARELLA, TOMMY

Address: 615 BAYSHORE DRIVE, #303 Address: 615 BAYSHORE DRIVE, #105 City-St-Zip: FORT LAUDERDALE, FL 33304 City-St-Zip: FORT LAUDERDALE, FL 33304

Title: S () Delete Title: S (X) Change () Addition Name: SWENSON, MARK Name: STRICKLAND, NEIL

Address: 615 BAYSHORE DRIVE, #106 Address: 615 BAYSHORE DRIVE, #701
City-St-Zip: FT. LAUDERDALE, FL 33304 City-St-Zip: FT. LAUDERDALE, FL 33304

Title: T () Delete Title: T (X) Change () Addition

Name: CASHMERE, DREW Name: BANKS, ROBIN

Address: 615 BAYHSORE DRIVE, #101 Address: 615 BAYHSORE DRIVE, #402
City-St-Zip: FT. LAUDERDALE, FL 33304 City-St-Zip: FT. LAUDERDALE, FL 33304

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: TERENCE MCGREGOR MR 01/15/2007