

2008 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT # N03000001787

1. Entity Name
CASABELLA PROPERTY OWNERS ASSOCIATION, INC.



08 JUL -8 AM 9:02

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Principal Place of Business
6300 PARK OF COMMERCE BLVD
BOCA RATON, FL 33487 US

Mailing Address
6300 PARK OF COMMERCE BLVD
BOCA RATON, FL 33487 US



2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

06132008 Chg-NP CR2E037 (12/06)

City & State

City & State

4. FEI Number
16-1695638

Applied For
Not Applicable

Zip

Country

Zip

Country

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

GELFAND, JAYME
PRIME MANAGEMENT GROUP
6300 PARK OF COMMERCE BLVE
BOCA RATON, FL 33487

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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

Amended AR is \$61.25

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

TITLE PT
NAME GAUDET, LYNN ☒ Delete
STREET ADDRESS 8637 STIRLING RD
CITY-ST-ZIP COOPER CITY, FL 33328

TITLE VS
NAME GOLDSTEIN, LARRY ☒ Delete
STREET ADDRESS 8637 STIRLING RD
CITY-ST-ZIP COOPER CITY, FL 33328

TITLE D
NAME VIRGINIA, KELLY ☐ Delete
STREET ADDRESS 8637 STIRLING RD
CITY-ST-ZIP COOPER CITY, FL 33328

TITLE
NAME ☐ Delete
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME ☐ Delete
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME ☐ Delete
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE President / Treasurer ☐ Change ☒ Addition
NAME Suarez, Mercedes
STREET ADDRESS 8637 Stirling Road
CITY-ST-ZIP Cooper city, FL 33328

TITLE Vice President / Secretary ☐ Change ☒ Addition
NAME Hillhouse, Paul
STREET ADDRESS 8637 Stirling Road
CITY-ST-ZIP Cooper city, FL 33328

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

TITLE
NAME ☐ Change ☐ Addition
STREET ADDRESS 400132596074
CITY-ST-ZIP 07/09/08--01035--012 **61.25

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

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

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #