

**2015 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 736592

**Entity Name:** CASABLANCA COMMUNITY ASSOCIATION, INC.

**FILED**  
**Jan 29, 2015**  
**Secretary of State**  
**CC4929634988**

**Current Principal Place of Business:**

9887 FOURTH STREET NORTH  
SUITE 301  
ST PETERSBURG, FL 33702

**Current Mailing Address:**

9887 FOURTH STREET NORTH  
SUITE 301  
ST PETERSBURG, FL 33702

**FEI Number: 59-1737998**

**Certificate of Status Desired: No**

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

ASSOCIA GULF COAST, INC.  
9887 FOURTH STREET NORTH  
SUITE 301  
SAINT PETERSBURG, FL 33702 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: MICHAEL FLEMING**

**01/29/2015**

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title PD  
Name LARREA, TIFFANIE  
Address 9887 FOURTH STREET NORTH  
SUITE 301  
City-State-Zip: ST PETERSBURG FL 33702

Title VP  
Name FORD, HERMAN  
Address 9887 FOURTH STREET NORTH  
SUITE 301  
City-State-Zip: ST PETERSBURG FL 33702

Title SD  
Name POLKOWSKI, JAMES  
Address 9887 FOURTH STREET NORTH  
SUITE 301  
City-State-Zip: ST PETERSBURG FL 33702

Title TD  
Name OGLESBY, JOE  
Address 9887 FOURTH STREET NORTH  
SUITE 301  
City-State-Zip: ST PETERSBURG FL 33702

Title D  
Name TOMLINSON, RACHEL  
Address 9887 FOURTH STREET NORTH  
SUITE 301  
City-State-Zip: ST PETERSBURG FL 33702

*I hereby 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 all other like empowered.*

**SIGNATURE: TIFFANIE LARREA**

**PRESIDENT**

**01/29/2015**

Electronic Signature of Signing Officer/Director Detail

Date