

**2017 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N02000002729

**Entity Name:** CASABELLA HOMEOWNERS ASSOCIATION, INC.

**Current Principal Place of Business:**

7145 TURNER ROAD  
SUITE 101  
ROCKLEDGE, FL 32955

**Current Mailing Address:**

7145 TURNER ROAD  
SUITE 101  
ROCKLEDGE, FL 32955 US

**FEI Number:** 42-1535442

**Certificate of Status Desired:** No

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

OMEGA COMMUNITY MANAGEMENT, INC.  
7145 TURNER ROAD  
SUITE 101  
ROCKLEDGE, FL 32955 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:**

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title PRES/SEC  
Name OCHIPA, MICHAEL  
Address 7145 TURNER ROAD  
SUITE 101  
City-State-Zip: ROCKLEDGE FL 32955

Title VP  
Name SMAIDRIS, THOMAS  
Address 7145 TURNER ROAD  
SUITE 101  
City-State-Zip: ROCKLEDGE FL 32955

Title DIRECTOR  
Name LEVY, RONALD  
Address 7145 TURNER ROAD  
SUITE 101  
City-State-Zip: ROCKLEDGE FL 32955

Title TRES  
Name WITSMAN, MARK  
Address 7145 TURNER ROAD  
SUITE 101  
City-State-Zip: ROCKLEDGE FL 32955

Title SECRETARY  
Name ROCHESTER, DALWIN  
Address 7145 TURNER ROAD  
SUITE 101  
City-State-Zip: ROCKLEDGE FL 32955

*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:** MICHAEL OCHIPA

**PRESIDENT**

**04/20/2017**

Electronic Signature of Signing Officer/Director Detail

Date