

**2016 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N03000001787

**Entity Name:** CASABELLA PROPERTY OWNERS ASSOCIATION, INC.

**Current Principal Place of Business:**

21045 COMMERCIAL TRAIL  
BOCA RATON, FL 33486

**Current Mailing Address:**

21045 COMMERCIAL TRAIL  
BOCA RATON, FL 33486 US

**FEI Number: 16-1695638**

**Certificate of Status Desired: Yes**

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

SACHS, SAX, CAPLAN  
6111 BROKEN SOUND PARKWAY  
SUITE 200  
BOCA RATON, FL 33487 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 DIRECTOR  
Name NICASTRO, FRANK  
Address 16219 ROSECROFT TERRACE  
City-State-Zip: DELRAY BEACH FL 33446

Title V.P.  
Name KNOTE, TED  
Address 8146 FERENTINO PASS  
City-State-Zip: DELRAY BEACH FL 33446

Title T  
Name LIVSHIN, STEVEN  
Address 16122 ROSECROFT TERRACE  
City-State-Zip: DELRAY BEACH FL 33446

Title P  
Name JACOBI, RICHARD  
Address 16035 ROSECROFT TERRACE  
City-State-Zip: DELRAY BEACH FL 33446

Title DIRECTOR  
Name DELUCA, LOUIS  
Address 15639 GLENCREST AVE  
City-State-Zip: DELRAY BEACH FL 33446

*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: RICHARD JACOBI**

**PRESIDENT**

**04/12/2016**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date