

**2019 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N07000002016

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

**Current Principal Place of Business:**

11145 TAMIAMI TRAIL EAST  
NAPLES, FL 34113

**Current Mailing Address:**

11145 TAMIAMI TRAIL EAST  
NAPLES, FL 34113

**FEI Number: NOT APPLICABLE**

**Certificate of Status Desired: No**

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

CECIL, W. JEFFREY ESQ  
PORTER WRIGHT MORRIS & ARTHUR LLP  
9132 STRADA PLACE-THIRD FLOOR  
NAPLES, FL 34108 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 DP  
Name KOULOHERAS, NICHOLAS  
Address 11145 TAMIAMI TRAIL EAST  
City-State-Zip: NAPLES FL 34113

Title DS  
Name CARIANY, WILNA  
Address 640 NORTH 9TH STREET  
City-State-Zip: IMMOKALEE FL 34142

Title DVP  
Name PARATORE, REBECCA  
Address 11145 TAMIAMI TRAIL EAST  
City-State-Zip: NAPLES FL 34113

Title DIRECTOR, VP  
Name LAZZARA, ELIZABETH  
Address 640 NORTH 9TH STREET  
City-State-Zip: IMMOKALEE FL 34142

*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: REBECCA PARATORE**

**DVP**

**04/02/2019**

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

\_\_\_\_\_  
Date