

2023 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N12000002049

Entity Name: CASCADA ISLE HOMEOWNERS ASSOCIATION, INC.**Current Principal Place of Business:**9600 GRIFFIN ROAD
COOPER CITY, FL 33328**Current Mailing Address:**9600 GRIFFIN ROAD
COOPER CITY, FL 33328 US**FEI Number:** 45-4496461**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**ELITE PROPERTY MANAGEMENT
9600 GRIFFIN ROAD
COOPER CITY, FL 33328 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:** JOSEPH BARONE

03/21/2023

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

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|-----------------|----------------------|
| Title | DIRECTOR |
| Name | LACKMANN, HUGO |
| Address | 9600 GRIFFIN ROAD |
| City-State-Zip: | COOPER CITY FL 33328 |

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| Title | PRESIDENT, TREASURER |
| Name | RAMSEWAK, VALMIKI |
| Address | 9600 GRIFFIN ROAD |
| City-State-Zip: | COOPER CITY FL 33328 |

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|-----------------|----------------------|
| Title | VP, SECRETARY |
| Name | WITT, MARGARET |
| Address | 9600 GRIFFIN ROAD |
| City-State-Zip: | COOPER CITY FL 33328 |

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|-----------------|----------------------|
| Title | DIRECTOR |
| Name | SHARMA, MANISH |
| Address | 9600 GRIFFIN ROAD |
| City-State-Zip: | COOPER CITY FL 33328 |

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| Title | DIRECTOR |
| Name | MORALES, MICHELLE |
| Address | 9600 GRIFFIN ROAD |
| City-State-Zip: | COOPER CITY FL 33328 |

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| Title | DIRECTOR |
| Name | GRAZIANO, MISAE |
| Address | 9600 GRIFFIN ROAD |
| City-State-Zip: | COOPER CITY FL 33328 |

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|-----------------|----------------------|
| Title | DIRECTOR |
| Name | DIMOULAS, VANESSA |
| Address | 9600 GRIFFIN ROAD |
| City-State-Zip: | COOPER CITY FL 33328 |

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: VALMIKI RAMSEWAK

PRESIDENT

03/21/2023

Electronic Signature of Signing Officer/Director Detail

Date