

# 2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 719592

FILED  
Mar 17, 2011  
Secretary of State

**Entity Name:** LA CASA DE LOS CARACOLES CONDOMINIUM ASSOCIATION, INC.

**Current Principal Place of Business:**

NOBLES MANAGEMENT  
251 WINDWARD PASS, STE F  
CLEARWATER BEACH, FL 33767 US

**New Principal Place of Business:**

JIM NOBLES MANAGEMENT  
251 WINDWARD PASS, STE F  
CLEARWATER BEACH, FL 33767 US

**Current Mailing Address:**

NOBLES MANAGEMENT  
251 WINDWARD PASS, STE F  
CLEARWATER BEACH, FL 33767 US

**New Mailing Address:**

JIM NOBLES MANAGEMENT  
251 WINDWARD PASS, STE F  
CLEARWATER BEACH, FL 33767 US

FEI Number: 59-1559253

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

JIM NOBLES MANAGEMENT, INC.  
251 WINDWARD PASSAGE  
SUITE F  
CLEARWATER, FL 33767 US

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

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

**OFFICERS AND DIRECTORS:**

Title: VPD  
Name: FAIRCLOTH, WADE  
Address: 4612 LAMB AVENUE  
City-St-Zip: TAMPA, FL 33629

Title: TSD  
Name: SKEMP, NANCY  
Address: 3113 WAVERLY PARK  
City-St-Zip: TAMPA, FL 33629 US

Title: PD  
Name: CLARKE, RICHARD SR.  
Address: 3435 BAYSHORE BLVD. #900  
City-St-Zip: TAMPA, FL 33629 US

Title: D  
Name: FIELDS, CAROLE  
Address: 1513 SHERIDAN FOREST DR.  
City-St-Zip: TAMPA, FL 33629

Title: D  
Name: ROMEO, JOHN  
Address: 13620 LAKE MAGDALENE BLVD  
City-St-Zip: TAMPA, FL 33618

Title: D  
Name: WARD, CARLTON  
Address: 1253 PARK ST.  
City-St-Zip: CLEARWATER, FL 33756 US

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 CLARKE, SR.

PD

03/17/2011

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date