

FILED
Apr 11, 2006 8:00 am
Secretary of State

04-11-2006 90120 005 ****61.25

**2006 NOT-FOR-PROFIT CORPORATION
ANNUAL REPORT**

00027046



04062006 Chg-NP CR2E037 (11/05)

4. FEI Number
59-1568553

Applied For
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

GUIZAR, STEPHANIE F
7202 LAS CASA DR.
SARASOTA, FL 34243

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

7202 LAS CASAS DR.

City

FL

Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**Filing Fee is \$61.25
Due by May 1, 2006**

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

**Make check payable to
Florida Department of State**

10. OFFICERS AND DIRECTORS

TITLE	DT	<input type="checkbox"/> Delete
NAME	GUIZAR, STEPHANIE	
STREET ADDRESS	7202 LAS CASAS DR	
CITY-ST-ZIP	SARASOTA, FL 34243	
TITLE	DS	<input checked="" type="checkbox"/> Delete
NAME	WASTON, WENDY	
STREET ADDRESS	7213 LAS CASAS DR	
CITY-ST-ZIP	SARASOTA, FL 34243	
TITLE	V	<input checked="" type="checkbox"/> Delete
NAME	GUIZAR, LARRY	
STREET ADDRESS	7202 LAS CASAS DR	
CITY-ST-ZIP	SARASOTA, FL 34243	
TITLE	P	<input type="checkbox"/> Delete
NAME	WATSON, ANDREW	
STREET ADDRESS	7213 LAS CASAS DRIVE	
CITY-ST-ZIP	SARASOTA, FL 34243	
TITLE	D	<input type="checkbox"/> Delete
NAME	WOODROOF, PHYLLIS	
STREET ADDRESS	7237 LAS CASAS DR	
CITY-ST-ZIP	SARASOTA, FL 34243	
TITLE	D	<input type="checkbox"/> Delete
NAME	FIELDS, ROBERT	
STREET ADDRESS	7233 LAS CASAS DR	
CITY-ST-ZIP	SARASOTA, FL 34243	

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	T	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE	D	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE	V	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE	S	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #


See next page for additional signatures

ATTACHMENT

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

ATTACHMENT

60027046

DOCUMENT # 725377 1. Entity Name LAS CASAS ASSOCIATION, INC.					
Principal Place of Business 7209 LAS CASAS DR. SARASOTA, FL 34243			Mailing Address 7202 LAS CASAS DR. SARASOTA, FL 34243 US		
2. Principal Place of Business		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State			
Zip	Country	Zip	Country		
4. FEI Number 59-1568553				Applied For Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/>				\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent			7. Name and Address of New Registered Agent		
GUIZAR, STEPHANIE F 7202 LAS CASA DR. SARASOTA, FL 34243			Name Street Address (P.O. Box Number is Not Acceptable) City <div style="text-align: right;">FL Zip Code</div>		
8. 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. I am familiar with, and accept the obligations of registered agent.					
SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) _____ DATE _____					
Filing Fee is \$61.25 Due by May 1, 2006		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>		\$5.00 May Be Added to Fees	
Make check payable to Florida Department of State					
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DT GUIZAR, STEPHANIE 7202 LAS CASAS DR SARASOTA, FL 34243	<input type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DS WASTON, WENDY 7213 LAS CASAS DR SARASOTA, FL 34243	<input type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V GUIZAR, LARRY 7202 LAS CASAS DR SARASOTA, FL 34243	<input type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P WATSON, ANDREW 7213 LAS CASAS DRIVE SARASOTA, FL 34243	<input type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D WOODROOF, PHYLLIS 7237 LAS CASAS DR SARASOTA, FL 34243	<input type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D FIELDS, ROBERT 7233 LAS CASAS DR SARASOTA, FL 34243	<input type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P MCHUGH, NOREEN 444 WHITFIELD AVE. SARASOTA, FL 34243	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D WERNER, CAROLYN 7228 LAS CASAS DR. SARASOTA, FL 34243	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D LOU FIORE, LOU 7217 LAS CASAS DR. SARASOTA, FL 34243	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition			
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition			
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition			
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition			
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SIGNATURE: <u>Stephanie F. Guizar</u> <u>STEPHANIE F. GUIZAR</u> <u>4/6/06</u> <u>941.951.3063</u>					