


2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
May 05, 2006 8:00 am
Secretary of State

05-05-2006 90195 031 ****61.25

DOCUMENT # 727261					
1. Entity Name CASA BONITA I CONDOMINIUM ASSOCIATION, INC.					
Principal Place of Business % 7380 MONTAU ROAD GERMAN VALLEY, IL 61039			Mailing Address 2180 W SR 434 STE 5000 LONGWOOD, FL 32779 US		
2. Principal Place of Business 27800 OLD 41 RD Suite, Apt. #, etc.			3. Mailing Address 27800 OLD 41 RD Suite, Apt. #, etc.		
City & State BONITA SPRINGS, FL		City & State BONITA SPRINGS, FL		4. FEI Number 59-6525355	
Zip 34135		Country USA		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		
			Name <input checked="" type="checkbox"/> STERLING PROPERTY SERVICES		
			Street Address (P.O. Box Number is Not Acceptable)		
			27800 OLD 41 RD		
			City BONITA SPRINGS FL Zip Code 34135		
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. <i>AS AGENT</i>					
SIGNATURE <i>Beaver</i> J.S. O'GORMAN			DATE 4/20/06		
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	PD	<input type="checkbox"/> Delete	TITLE	S	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	LEEK, STEVE		NAME		
STREET ADDRESS	7380 MONTAU RD		STREET ADDRESS		
CITY-ST-ZIP	GERMAN VALLEY, IL 61039		CITY-ST-ZIP		
TITLE	VPD	<input type="checkbox"/> Delete	TITLE	VPD SAME	<input checked="" type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	STAUTBERG, ROBERT		NAME		
STREET ADDRESS	5580 CLEVES WARSAW PKWY		STREET ADDRESS		
CITY-ST-ZIP	CINCINNATI, OH 45238		CITY-ST-ZIP		
TITLE	TD	<input type="checkbox"/> Delete	TITLE	TD T	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	KENNEFICK, KEVIN		NAME		
STREET ADDRESS	3241 CASCO CIR		STREET ADDRESS		
CITY-ST-ZIP	WAYZATA, MN 55391		CITY-ST-ZIP		
TITLE	SD	<input checked="" type="checkbox"/> Delete	TITLE	PD	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	RAIN, MARY E		NAME	ALLAN FEINGOLD	
STREET ADDRESS	26000 HICKORY BLVD #703		STREET ADDRESS	1400 SHIRE CIRCLE	
CITY-ST-ZIP	BONITA SPRINGS, FL 34134		CITY-ST-ZIP	INVERNESS, IL, 60067	
TITLE	D	<input type="checkbox"/> Delete	TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	MCEVOY, DONALD		NAME	SAME	
STREET ADDRESS	26000 HICKORY BLVD #803		STREET ADDRESS		
CITY-ST-ZIP	BONITA SPRINGS, FL 34134		CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete	TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY-ST-ZIP			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: <i>Beaver</i> AS AGENT J.S. O'GORMAN			Date 4/20/06 (239) 947 4552		
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR			Date		

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