

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 733661

FILED
Jan 16, 2007
Secretary of State

Entity Name: CASTEL DEL MARE CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

1620 STICKNEY POINT RD.
SARASOTA, FL 34231

New Principal Place of Business:

Current Mailing Address:

1620 STICKNEY POINT RD.
SARASOTA, FL 34231

New Mailing Address:

FEI Number: 59-1976184

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

JURRENS, JANELL
1620 STICKNEY PT. RD
SARASOTA, FL 34231 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: P () Delete
Name: MCCOY, PAUL F
Address: 1610 STICKNEY PT RD
City-St-Zip: SARASOTA, FL 34231

Title: VP () Delete
Name: HAMBLIN, FRED
Address: 1620 STICKNEY PT. RD #102
City-St-Zip: SARASOTA, FL 34231

Title: S () Delete
Name: MAMAK, WALTER
Address: 1618 STICKNEY PT. RD 3201
City-St-Zip: SARASOTA, FL 34231

Title: T () Delete
Name: ZACHARIAS, ANDREW
Address: 1608 STICKNEY PT RD #103
City-St-Zip: SARASOTA, FL 34231

Title: D () Delete
Name: HELSING, RAY
Address: 1624 SRICKNEY PT. RD #202
City-St-Zip: SARASOTA, FL 34231

Title: D () Delete
Name: COLLINS, ED
Address: 1630 STICKNEY PT. RD. #101
City-St-Zip: SARASOTA, FL 34231

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: MCCOY, PAUL F
Address: 1610 STICKNEY PT RD #202
City-St-Zip: SARASOTA, FL 34231

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: S (X) Change () Addition
Name: MAMAK, WALTER
Address: 1618 STICKNEY PT. RD #201
City-St-Zip: SARASOTA, FL 34231

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: D (X) Change () Addition
Name: HELSING, RAY
Address: 1624 STICKNEY PT. RD #202
City-St-Zip: SARASOTA, FL 34231

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated 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 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 an address, with all other like empowered.

SIGNATURE: PAUL MCCOY

PRES

01/16/2007

Electronic Signature of Signing Officer or Director

Date