


2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 28, 2005 8:00 am
Secretary of State

04-28-2005 90186 015 ****61.25

DOCUMENT # 745091

1. Entity Name
CASA YBEL BEACH AND RACQUET CLUB CONDOMINIUM ASSOCIATION, INC.



Principal Place of Business
**2255 WEST GULF DR
 SANIBEL, FL 33957 US**

Mailing Address
**1509 PERIWINKLE WAY
 SANIBEL, FL 33957 US**

14004386



01032005 Chg-NP CR2E037 (10/03)

2. Principal Place of Business
 Suite, Apt. #, etc.

3. Mailing Address
 Suite, Apt. #, etc.

City & State

4. FEI Number
59-1980596

Applied For
 Not Applicable

City & State

Zip Country Zip Country

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

6. Name and Address of Current Registered Agent

**HILTON GRAND VACATIONS COMPANY, LLC
 6355 METROWEST BLVD STE 180
 ORLANDO, FL 32835**

7. Name and Address of New Registered Agent

Name
 Street Address (P.O. Box Number is Not Acceptable)
 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 _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

**Filing Fee is \$61.25
 Due by May 1, 2005**

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	PD	<input type="checkbox"/> Delete
NAME	DETTYER, LINDA R	
STREET ADDRESS	456 BIRCH PLACE	
CITY-ST-ZIP	WESTFIELD, NJ 07090	
TITLE	D	<input type="checkbox"/> Delete
NAME	D'ALESSANDRO, JOSEPH P.	
STREET ADDRESS	1130 SHADOW LANE	
CITY-ST-ZIP	FORT MYERS, FL	
TITLE	D	<input type="checkbox"/> Delete
NAME	WILDER, JANET F	
STREET ADDRESS	5807 CREIGHTON HILL RD	
CITY-ST-ZIP	LOUISVILLE, KY 40207	
TITLE	D	<input type="checkbox"/> Delete
NAME	APPELBERG, CARL J	
STREET ADDRESS	14649 AERIES WAY DR	
CITY-ST-ZIP	FORT MYERS, FL 33912	
TITLE	STD	<input type="checkbox"/> Delete
NAME	BURRUANO, CHARLES A	
STREET ADDRESS	6278 N FEDERAL HIGHWAY #325	
CITY-ST-ZIP	FORT LAUDERDALE, FL 33308	
TITLE	VD	<input type="checkbox"/> Delete
NAME	JACKSON, RICHARD K.	
STREET ADDRESS	661 EL DORADO PKWY.	
CITY-ST-ZIP	PLANTATION, FL 33317	

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

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	<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	<input 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 exemption stated in Section 119.07(3)(i), 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: Jonda R. Kelly
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

March 7, 2005 (908) 654-0532
Date Daytime Phone #

