

FILE NOW: FILING FEE AFTER MAY 1 IS \$155.00

CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
Sandra B. Northam
Secretary of State
DIVISION OF CORPORATIONS

95 MAR 13 AM 9:00

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # 752266 (7)
1. Corporation Name
CASA SIERRA CONDOMINIUM ASSOCIATION, INC.

DO NOT WRITE IN THIS SPACE

Principal Place of Business Mailing Address
PO BOX 10584 TAMPA FL 33679-0584 PO BOX 10584 TAMPA FL 33679-0584

3. Date Incorporated or Qualified 05/01/1980 3a. Date of Last Report 04/18/1994
4. FEI Number NOT APPLICABLE Applied For Not Applicable

2. Principal Place of Business 2a. Mailing Address
21 205-36th Dr. 26 205-36th Dr.
Suite, Apt. #, etc. Unit 1 Suite, Apt. #, etc. Unit 1
22 City & State Holmes Beach 27 City & State Holmes Beach
23 Zip 34217 Country FL 28 Zip 34217 Country FL
24 25 29 30

5. Certificate of Status Desired \$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution \$5.00 May Be Added to Fees
7. Nonprofit with IRS 501(c)(3) Tax Exempt Status \$68.75 Supplemental Fee Not Required
8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes Yes No

SIERRA, ELMA M.
3919 NORTH B STREET
TAMPA FL 33609

10. Name and Address of New Registered Agent
81 Name Audrey M. Smith
82 Street Address (P.O. Box Number is Not Acceptable) 205-36th Dr. Unit 1
83 City Holmes Beach FL 84 Zip Code 34217

11. Pursuant to the provisions of Sections 607.0502 and 607.1503, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE Audrey M. Smith 1/26/95
(NOTE: Registered Agent signature required when re-registering)

12. OFFICERS AND DIRECTORS				13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12			
TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	1.1 TITLE	1.2 NAME	1.3 STREET ADDRESS	1.4 CITY-ST-ZIP
PD	SIERRA, JOSEPH I.	3919 NORTH B ST.	TAMPA FL	☒ Change ☐ Addition	Audrey M. Smith	205-36th Dr. Unit 1	Holmes Beach, FL 34217
STD	SIERRA, ELMA M.	3919 NORTH B ST.	TAMPA FL	☒ Change ☐ Addition	Jack A. Smith	205-36th Dr. Unit 1	Holmes Beach, FL 34217
VD	COLWART, DEBRA S.	3919 NORTH B ST.	TAMPA FL	☒ Change ☐ Addition	Melissa A. Little	205-36th Dr. Unit 1	Holmes Beach, FL 34217
				☐ Change ☐ Addition			
				☐ Change ☐ Addition			
				☐ Change ☐ Addition			
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3/13/95

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 110.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: Audrey M. Smith 1/26/95 778-0032
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR