2007 NOT-FOR-PROFIT CORPORATION

Apr 19, 2007 8:00 am Secretary of State ANNUAL REPORT **DOCUMENT #758223** 04-19-2007 90182 050 ****61.25 CASÁ ENCANTADA CONDOMINIUM ASSSOCIATION, INC. Principal Place of Business Mailing Address 340 BRAZILIAN AVE **C.O TOUCHSTONE WEBB** 225 SOUTHERN BLVD., #202 PALM BEACH, FL 33480 US WEST PALM BEACH, FL 33405 2. Principal Place of Business - No P.O. Box # 3. Mailing Address Suite Apt. #. etc. Suite, Apt. #, etc. 04072007 Chg-NP CR2E037 (12/06) City & State City & State 4. FEI Number Applied For 59-2377169 Not Applicable Zip Country Zio Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Zichard & HAllett SALATA, KATHLEEN Street Address (P.O. Box Number is Not Acceptable) 225 SOUTHERN BLVD SUITE 202 WEST PALM BEACH, FL 33405 wellington 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 9. Election Campaign Financing \$5.00 May Be Make check payable to Filing Fee is \$61.25 Trust Fund Contribution. П Florida Department of State Due by May 1, 2007 Added to Fees ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 OFFICERS AND DIRECTORS 10. 11. A TO TITLE Delete TITLE ☐ Change Addition GALANTUCCI, ROBERT NAME NAME 340 BRAZILIAN AVE., #103 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP PALM BEACH, FL 33480 CITY-ST-ZIP 1 70 TITLE Delete TITLE ☐ Change Addition GOUGH, NANACY NAME NAME STREET ADDRESS 340 BRAZILIAN AVE., #301 STREET ADDRESS PALM BEACH, FL 33480 CITY-ST-7IP CITY-ST-7IP A TD ☐ Delete TITLE TITLE Change Change ☐ Addition CARLSON, JEAN NAME 340 BRAZILIAN AVE., #201 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP PALM BEACH, FL 33480 CITY-ST-ZIP TITLE ☐ Delete Change ☐ Addition HANFORD, LAUISE NAME NAME STREET ADDRESS 340 BRAZILIAN AVE., #202 STREET ADDRESS CITY-ST-ZIP PALM BEACH, FL 33480 CITY-ST-ZIP TITLE ☐ Delete TILLE Change Addition MCCURRACH, DOUG NAME NAME STREET ADDRESS 340 BRAZILIAN AVE., #101 STREET ADDRESS CITY-ST-ZIP PALM BEACH, FL 33480 CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ■ Addition SNEIDER, RAY NAME NAME 340 BRAZILIAN AVE., #102 STREET ADDRESS STREET ADDRESS

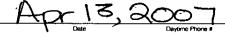
12. I hereby certify that the information supplied with this filling does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal 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.

CITY-ST-ZIP

PALM BEACH, FL 33480

CITY-ST-ZIP

SIGNATURE: 1



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