

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 759270

FILED
Mar 27, 2009
Secretary of State

Entity Name: BOCA CASA HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:

21 SE 5TH STREET
SUITE 100
BOCA RATON, FL 33432

New Principal Place of Business:

Current Mailing Address:

21 SE 5TH STREET
SUITE 100
BOCA RATON, FL 33432

New Mailing Address:

FEI Number: 59-2113372

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BISHOP, TERESA C
21 SE 5TH ST STE 100
BOCA RATON, FL 33432 US

Name and Address of New Registered Agent:

BISHOP, TERESA C
21 SE 5TH STREET
SUITE 100
BOCA RATON, FL 33432 US

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: TERESA C BISHOP

03/27/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: JOHNSON, MALLORY
Address: 21597 CASA MONTE CT
City-St-Zip: BOCA RATON, FL 33433

Title: D () Delete
Name: KIRCHBESSNER, CONNIE
Address: 2653 CASA MONTE CT
City-St-Zip: BOCA RATON, FL 33433

Title: D () Delete
Name: CHAVEZ, CARMEN
Address: 21604 CASA MONTE DRIVE
City-St-Zip: BOCA RATON, FL 33433

Title: DT () Delete
Name: SENECA, JENNIFER
Address: 21596 CASA MONTE CT
City-St-Zip: BOCA RATON, FL 33433

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: JOHNSON, MELORY
Address: 21597 CASA MONTE COURT
City-St-Zip: BOCA RATON, FL 33433

Title: D (X) Change () Addition
Name: KIRCHGEISSNER, CONNIE
Address: 21653 CASA MONTE COURT
City-St-Zip: BOCA RATON, FL 33433

Title: S (X) Change () Addition
Name: CHAVEZ, CARMEN
Address: 21604 CASA MONTE COURT
City-St-Zip: BOCA RATON, FL 33433

Title: T (X) Change () Addition
Name: SENECA, JENNIFER
Address: 21596 CASA MONTE COURT
City-St-Zip: BOCA RATON, FL 33433

I hereby certify that the information supplied with this filing does not qualify 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: MELORY JOHNSON

P

03/27/2009

Electronic Signature of Signing Officer or Director

Date