

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 22, 2007 08:00 AM
Secretary of State

DOCUMENT # 762650

1. Entity Name
CASA BLANCA RESORT CONDOMINIUM ASSOCIATION, INC.



Principal Place of Business
**11115 FRONT BEACH BLVD
PANAMA CITY BCH, FL 32407**

Mailing Address
**11115 FRONT BEACH BLVD
PANAMA CITY BCH, FL 32407**



01202007 No Chg-NP CR2E037 (4/06)

DO NOT WRITE IN THIS SPACE

4. FEI Number
59-2283655 Applied For
Not Applicable
5. Certificate of Status Desired ☐ **\$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

**HESS, BRIAN D
9108 FRONT BEACH ROAD
PANAMA CITY BEACH, FL 32407**

**DO NOT WRITE
IN THIS SPACE**

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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

**Filing Fee is \$61.25
Due by May 1, 2007**

9. Election Campaign Financing
Trust Fund Contribution. ☐ **\$5.00** May Be Added to Fees

U00000598762
01/24/07-80098-022 61.25

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD WEBB, NELL 7540 NORTHSHORES DRIVE NAVARRE, FL 32566
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD BAZZEL, WILLIE 2801 AIRPORT DRIVE PANAMA CITY, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD HUNERWADEL, CHARLES 7925 SHORT TAIL SPRINGS ROAD OOLTEWAH, TN 37363
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D HAMILTON, BETTY 7 STRATFORD LANE ENTERPRISE, AL 36330
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D JESSUP, SHIRLEY 11 TIDE CREEK DR OCALOCKONEE BAY, FL 32346
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing 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 fee empowered.

SIGNATURE:

Thomas J. Pisalvato
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/20/07
Date

850 234-6230
Daytime Phone #