

# 2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 763098

FILED  
Apr 27, 2005  
Secretary of State

Entity Name: CASA CAPRONA OWNERS ASSOCIATION, INC.

## Current Principal Place of Business:

2605 ST LUCIE BLVD  
#4  
FORT PIERCE, FL 34946 US

## Current Mailing Address:

2605 ST LUCIE BLVD  
#4  
FORT PIERCE, FL 34946 US

## New Principal Place of Business:

2605 ST LUCIE BLVD  
#23  
FORT PIERCE, FL 34946 US

## New Mailing Address:

2605 ST LUCIE BLVD  
#23  
FORT PIERCE, FL 34946 US

FEI Number: 59-2239241

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

CAMP, PHILIP L  
2605 ST LUCIE BLVD  
#4  
FT PIERCE, FL 34946 US

## Name and Address of New Registered Agent:

BEACH, DEBRA H  
2605 ST LUCIE BLVD  
#23  
FT PIERCE, FL 34946 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: DEBRA HUTCHINSON-BEACH

04/27/2005

Electronic Signature of Registered Agent

Date

## OFFICERS AND DIRECTORS:

Title: PD ( ) Delete  
Name: PRENTICE, ANITA  
Address: 2605 ST LUCIE BLVD, #1  
City-St-Zip: FT. PIERCE, FL 34946

Title: VD ( ) Delete  
Name: BECOME, GEORGE  
Address: 2605 ST LUCIE BLVD, #27  
City-St-Zip: FT PIERCE, FL 34946

Title: TD ( ) Delete  
Name: CAMP, PHILLIP  
Address: 2605 ST LUCIE BLVD. #4  
City-St-Zip: FORT PIERCE, FL 34946

Title: SD ( ) Delete  
Name: MARIA, KRAUSE  
Address: 2605 ST LUCIE BLVD #7  
City-St-Zip: FORT PIERCE, FL 34946

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: TD (X) Change ( ) Addition  
Name: BEACH, DEBRA H  
Address: 2605 ST LUCIE BLVD. #23  
City-St-Zip: FORT PIERCE, FL 34946

Title: SD (X) Change ( ) Addition  
Name: AGNES, LAVIAL  
Address: 2605 ST LUCIE BLVD #27  
City-St-Zip: FORT PIERCE, FL 34946

I hereby certify that the information supplied with this filing does not qualify for the 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 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: DEBRA HUTCHINSON-BEACH

TD

04/27/2005

Electronic Signature of Signing Officer or Director

Date