

2010 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT**FILED**
Mar 10, 2010
Secretary of State

DOCUMENT# 767185

Entity Name: CASA RIO CONDOMINIUM ASSOCIATION, INC.**Current Principal Place of Business:**250 ENGLEWOOD ISLES PARKWAY
ENGLEWOOD, FL 34223 US**New Principal Place of Business:**368 NORTHWEST 14TH PLACE
CRYSTAL RIVER, FL 34428 US**Current Mailing Address:**1271 BEACH ROAD
ENGLEWOOD, FL 34223 US**New Mailing Address:**368 NORTHWEST 14TH PLACE
CRYSTAL RIVER, FL 34428 US**FEI Number:** 59-2316400**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired ()****Name and Address of Current Registered Agent:**SURFSIDE REALTY & CO INC
1271 BEACH ROAD
ENGLEWOOD, FL 34223 US**Name and Address of New Registered Agent:**HERIG, BOB
383 NW 14TH PL UNIT 8
CRYSTAL RIVER, FL 34428 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: BOB HERIG

03/10/2010

Electronic Signature of Registered Agent_____
Date**OFFICERS AND DIRECTORS:**

Title: PD
Name: HERIG, BOB
Address: 383 NW 14TH PL UNIT 8
City-St-Zip: CRYSTAL RIVER, FL 34428

Title: D
Name: SCHRADE, JEFFEREY
Address: 364 NW 14TH PL
City-St-Zip: CRYSTAL RIVER, FL 34428

Title: TD
Name: CANTRELL, CHARLES
Address: 4700 NE 97TH ROAD
City-St-Zip: ANTHONY, FL 32617

Title: D
Name: CONNELLY, MICHAEL
Address: 4881 NW 69TH ST
City-St-Zip: OCALA, FL 34482

Title: SD
Name: CARTER, RONNIE
Address: 1956 SE CLATTERBRIDGE RD
City-St-Zip: OCALA, FL OCAL34471

I hereby 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 all other like empowered.

SIGNATURE: BOB HERIG

P

03/10/2010

Electronic Signature of Signing Officer or Director_____
Date