

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 12, 2007 8:00 am
Secretary of State

02-12-2007 90065 043 ****61.25

DOCUMENT # 769461			
1. Entity Name CAJO ASSOCIATION, INC.			
Principal Place of Business 305 NW 78 AVE PLANTATION, FL 33324		Mailing Address P.O. BOX 17015 PLANTATION, FL 33318	
2. Principal Place of Business - No P.O. Box #		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country
6. Name and Address of Current Registered Agent		7. Name and Address of New Registered Agent	
KNOX, ROBERT 470 NW 78TH TERRACE PLANTATION, FL 33324		Name	
		Street Address (P.O. Box Number is Not Acceptable)	
		City	
		FL	Zip Code
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. <input type="checkbox"/> \$5.00 May Be Added to Fees	
		Make check payable to Florida Department of State	
10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE	P <input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	KNOX, ROBERT J	NAME	
STREET ADDRESS	305 NW 78TH AVE	STREET ADDRESS	
CITY-ST-ZIP	PLANTATION, FL 33324	CITY-ST-ZIP	
TITLE	VP <input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	GOODSTEIN, RICHARD	NAME	
STREET ADDRESS	286 NW 78TH AVE	STREET ADDRESS	
CITY-ST-ZIP	PLANTATION, FL 33324	CITY-ST-ZIP	
TITLE	VP <input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	HOLSCHAUER, RUBEN	NAME	
STREET ADDRESS	7761 NORTHWEST 4TH STREET	STREET ADDRESS	
CITY-ST-ZIP	PLANTATION, FL 33324	CITY-ST-ZIP	
TITLE	T <input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	OBRADOVICH, JORGE	NAME	
STREET ADDRESS	7900 CANTERBURY LANE	STREET ADDRESS	
CITY-ST-ZIP	PLANTATION, FL 33324	CITY-ST-ZIP	
TITLE	S <input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	TEJEDA, HAROLD	NAME	
STREET ADDRESS	296 NW 78TH AVE	STREET ADDRESS	
CITY-ST-ZIP	PLANTATION, FL 33324	CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY-ST-ZIP		CITY-ST-ZIP	
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 like empowered.			
SIGNATURE: <i>Robert J. Knox, President</i>		Date: 2/9/07	Daytime Phone #: 954-452-9660
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		Date	Daytime Phone #

40013158



02072007 Chg-NP CR2E037 (12/06)

4. FEI Number 59-2370121 Applied For Not Applicable

5. Certificate of Status Desired \$8.75 Additional Fee Required

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City & State	City & State	4. FEI Number 59-2370121	<input type="checkbox"/> Applied For <input type="checkbox"/> Not Applicable
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SIGNATURE: *Robert Knox, President* Date: *2/9/07* Daytime Phone #: *954-453-9660*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

ATTACHMENT



40013158

1260

CAJO Association, Inc.

P.O. BOX 17015
PLANTATION, FL 33318

63-4/630

2/7/2007

PAY
TO THE
ORDER OF

Florida Department of State

\$ **61.25

Sixty-One and 25/100***** DOLLARS

Division of Corporations
P.O. Box 1500
Tallahassee, FL 32302-1500

Security features. Details on back.



MEMO Document # 769461

AUTHORIZED SIGNATURE

CAJO Association, Inc.

Florida Department of State

Doc. #769461

2/7/2007

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Checking - Bank of Americ Document # 769461

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STREET ADDRESS		
CITY-ST-ZIP		

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