

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 04, 2008 8:00 am
Secretary of State

02-04-2008 90060 025 ****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

01172008 Chg-NP CR2E037 (12/06)

4. FEI Number
59-2370121

Applied For
Not Applicable

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

6. Name and Address of Current Registered Agent

KNOX, ROBERT
470 NW 78TH TERRACE
PLANTATION, FL 33324

7. Name and Address of New Registered Agent

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

Signature, typed or printed name of registered agent, and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

Filing Fee is \$61.25
Due by May 1, 2008

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

Make check payable to
Florida Department of State

10. OFFICERS AND DIRECTORS

TITLE	P	<input type="checkbox"/> Delete
NAME	KNOX, ROBERT J	
STREET ADDRESS	305 NW 78TH AVE	
CITY-ST-ZIP	PLANTATION, FL 33324	
TITLE	VP	<input type="checkbox"/> Delete
NAME	GOODSTEIN, RICHARD	
STREET ADDRESS	286 NW 78TH AVE	
CITY-ST-ZIP	PLANTATION, FL 33324	
TITLE	VP	<input type="checkbox"/> Delete
NAME	HOLSCHAUER, RUBEN	
STREET ADDRESS	7761 NORTHWEST 4TH STREET	
CITY-ST-ZIP	PLANTATION, FL 33324	
TITLE	T	<input type="checkbox"/> Delete
NAME	OBRADOVICH, JORGE	
STREET ADDRESS	7900 CANTERBURY LANE	
CITY-ST-ZIP	PLANTATION, FL 33324	
TITLE	S	<input type="checkbox"/> Delete
NAME	TEJEDA, HAROLD	
STREET ADDRESS	296 NW 78TH AVE	
CITY-ST-ZIP	PLANTATION, FL 33324	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2/1/08

954-452-9660