


2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Sep 05, 2007 08:00 AM
Secretary of State

DOCUMENT # F04000002344	
1. Entity Name CASA DEL MONTE MANAGER, INC.	

Principal Place of Business 2121 N.W. 29TH COURT FT. LAUDERDALE, FL 33311	Mailing Address 2121 N.W. 29TH COURT FT. LAUDERDALE, FL 33311
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07162007 No Chg-P CR2E034 (11/05)

4. FEI Number 76-0788054	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent BELLINSON, JAMES L 2121 N.W. 29TH COURT FT. LAUDERDALE, FL 33311

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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.	000000773316 09/05/07-80006-005 150.00
SIGNATURE _____ <small>Signature, typed or printed name of registered agent and title if applicable</small>	DATE _____ <small>(NOTE: Registered Agent signature required when reinstating)</small>

FILE NOW!!! FEE IS \$150.00 Due by September 14, 2007	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-STATE-ZIP	PSCD BELLINSON, JAMES L 370 MAPLE ROAD, THIRD FLOOR BIRMINGHAM, MI 48009
TITLE NAME STREET ADDRESS CITY-STATE-ZIP	CD DAVIS, ROBERT S 370 MAPLE ROAD, THIRD FLOOR BIRMINGHAM, MI 48009
TITLE NAME STREET ADDRESS CITY-STATE-ZIP	D UVA, KENNETH J 1209 ORANGE STREET WILLMINGTON, DE 19801
TITLE NAME STREET ADDRESS CITY-STATE-ZIP	
TITLE NAME STREET ADDRESS CITY-STATE-ZIP	
TITLE NAME STREET ADDRESS CITY-STATE-ZIP	

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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 607, 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: _____ <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>	JIM BELLINSON	8/30/07	248-988-8845
		Date	Daytime Phone #