2006 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT

FILED
Jul 31, 2006
Secretary of State

DOCUMENT# F04000005741

Entity Name: CASA LA ATARRAYA, INC.

Current Principal Place of Business:

1753 SW ERIE ST.
PORT ST. LUCIE, FL 34953

New Principal Place of Business:

Current Mailing Address:

1753 SW ERIE STREET
PORT ST.LUCIE, FL 34953

New Mailing Address:

FEI Number: 98-0130141 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

HAMILTON, ROBERT
1753 SW ERIE STREET
PORT ST. LUCIE, FL 34953 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent — Date

OFFICERS AND DIRECTORS:

Title: P ( ) Delete
Name: HAMILTON, ROBERT
Address: 1753 SW ERIE ST.
City-St-Zip: PORT ST. LUCIE, FL 34953

Title: TSD ( ) Delete
Name: GENS, MARY
Address: 5786 STILLWELL COURT
City-St-Zip: HARRISBURG, PA 17112

Title: D ( ) Delete
Name: GOODYEAR, JOHN
Address: 21 WOODED DRIVE
City-St-Zip: DILLSBURG, PA 17019

Title: D ( ) Delete
Name: GOODYEAR, RUTHANNA
Address: 21 WOODED DRIVE
City-St-Zip: DILLSBURG, PA 17019

Title: D ( ) Delete
Name: BEITLER, DAVID REV
Address: 625 S 29TH STREET
City-St-Zip: HARRISBURG, PA 17111

Title: D ( ) Delete
Name: SHEARER, BETTY
Address: 15 SILVER SPRING ROAD
City-St-Zip: MECHANICSBURG, PA 17055

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

Title: D (X) Change ( ) Addition
Name: HAMILTON, MARIA
Address: 1753 SW ERIE ST.
City-St-Zip: PORT ST. LUCIE, FL 34953

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

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

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated 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 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: ROBERT A. HAMILTON P 07/31/2006

Electronic Signature of Signing Officer or Director — Date