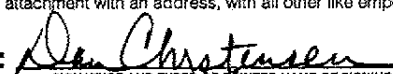


**2004 NOT-FOR-PROFIT CORPORATION
ANNUAL REPORT**

FILED
Mar 29, 2004 08:00 AM
Secretary of State

DOCUMENT # N01418 1. Entity Name CASA CAYO CONDOMINIUM ASSOCIATION, INC.			
Principal Place of Business 1500 OVERSEAS HWY MARATHON, FL 33050		Mailing Address C/O RHONDA HALL 11 SOMBRERO BLVD #11 MARATHON, FL 33050 US	
DO NOT WRITE IN THIS SPACE			
		 03252004 No Chg-NP OR2E037 (10/03)	
		4. FEI Number 59-2692987	Applied For Not Applicable
		5. Certificate of Status Desired ☐	\$8.75 Additional Fee Required
6. Name and Address of Current Registered Agent HALL, RHONDA 11 SOMBRERO BLVD #11 MARATHON, FL 33050		DO NOT WRITE IN THIS SPACE	
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, 2004		9. Election Campaign Financing Trust Fund Contribution. ☐	\$5.00 May Be Added to Fees
10. OFFICERS AND DIRECTORS		100000098535 03/29/04-80047-003 61.25 DO NOT WRITE IN THIS SPACE	
TITLE NAME STREET ADDRESS CITY- ST- ZIP	D HENTHORNE, JAY 3927 CLEVELAND RD WOOSTER, OH 44691		
TITLE NAME STREET ADDRESS CITY- ST- ZIP	VPD FOX, MARGARET 305 PRIVATE RD MATCITUCK, NY 11952		
TITLE NAME STREET ADDRESS CITY- ST- ZIP	PD CHRISTENSEN, DANIEL 1031 PINE BRANCH DRIVE FT. LAUDERDALE, F 33326		
TITLE NAME STREET ADDRESS CITY- ST- ZIP	D KRAUS, PAUL 4 OVERLOOK DR. HOLMDEL, NJ 07733		
TITLE NAME STREET ADDRESS CITY- ST- ZIP	SD FURDA, LEIGH 425 WESTWOOD DR. BARRINGTON, IL 60010		
TITLE NAME STREET ADDRESS CITY- ST- ZIP			
12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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:  DAN CHRISTESEN		Date 3-25-04	Daytime Phone # 954-253-0343