2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01418

FILED Mar 19, 2009 Secretary of State

Entity Name: CASA CAYO CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business: New Principal Place of Business:

1500 OVERSEAS HWY MARATHON, FL 33050

Current Mailing Address: New Mailing Address:

C/O RHONDA HALL 11 SOMBRERO BLVD #11 MARATHON, FL 33050 US

FEI Number: 59-2692987 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

HALL, RHONDA 11 SOMBRERO BLVD #11 MARATHON, FL 33050 US

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:

Flacture Complete of Decision 1 Asset

Electronic Signature of Registered Agent

Date

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

OFFICERS AND DIRECTORS:

 Title:
 VPD () Delete
 Title:
 PD (X) Change () Addition

 Name:
 FURDA, GREG
 Name:
 FURDA, GREG

 Address:
 300 N STATE ST. #4103
 Address:
 300 N STATE ST. #4103

 City-St-Zip:
 CHICAGO, IL 60610
 City-St-Zip:
 CHICAGO, IL 60610

Title: D () Delete Title: TD (X) Change () Addition Name: SIEMON, JAMES Name: SIEMON, JAMES

Address: 430 WOODSIDE DRIVE
City-St-Zip: WEST PALM BEACH, FL 33415

Address: 430 WOODSIDE DRIVE
City-St-Zip: WEST PALM BEACH, FL 33415

Title: STD () Delete Title: SD (X) Change () Addition Name: GAUKEL, LORI Name: GAUKEL, LORI

Address: 5382 HARPER RD Address: 5382 HARPER RD
City-St-Zip: HOLT, MI 48842 City-St-Zip: HOLT, MI 48842

Title: D () Delete Title: () Change () Addition

 Name:
 ROTTSCHAFER, TIM
 Name:

 Address:
 1339 BAYVIEW DRIVE
 Address:

 City-St-Zip:
 HOLLAND, MI 49423
 City-St-Zip:

Title: VPD () Delete Title: () Change () Addition

 Name:
 KRAUS, PAUL
 Name:

 Address:
 4 OVER LOOK DR.
 Address:

 City-St-Zip:
 HOLMDEL, NJ 07733
 City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify 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: RHONDA HALL RA 03/19/2009