

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000005583

FILED  
Mar 16, 2009  
Secretary of State

Entity Name: CASA BELLA OF VERO BEACH HOMEOWNERS' ASSOCIATION, INC.

## Current Principal Place of Business:

4162 W. 16TH SQUARE  
VERO BEACH, FL 32967 US

## New Principal Place of Business:

4142 W. 16TH SQUARE  
VERO BEACH, FL 32967 US

## Current Mailing Address:

PO BOX 643697  
VERO BEACH, FL 32964 US

## New Mailing Address:

4142 W. 16TH SQUARE  
VERO BEACH, FL 32967 US

FEI Number: 54-2103912

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

COLMEY, JOHN  
4162 W. 16TH SQUARE  
VERO BCH, FL 32967 US

## Name and Address of New Registered Agent:

GORMAN, DAVID  
4142 W. 16TH SQUARE  
VERO BCH, FL 32967 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: DAVID GORMAN

03/16/2009

Electronic Signature of Registered Agent

Date

## OFFICERS AND DIRECTORS:

Title: D, P ( ) Delete  
Name: COLMEY, JOHN  
Address: 4162 W. 16TH SQUARE  
City-St-Zip: VERO BEACH, FL 32967 US

Title: D, T ( ) Delete  
Name: GORMAN, DAVID J  
Address: 4142 W. 16TH SQUARE  
City-St-Zip: VERO BEACH, FL 32967

Title: D, S ( ) Delete  
Name: BOSCHKER, JAMES I  
Address: 4177 W. 16TH SQUARE  
City-St-Zip: VERO BEACH, FL 32967

Title: D, V ( ) Delete  
Name: NEWMAN, ROBERTA K  
Address: 4122 W. 16TH SQUARE  
City-St-Zip: VERO BEACH, FL 32967

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D, P (X) Change ( ) Addition  
Name: WICHMAN, JANET  
Address: 4135 E. 16TH SQUARE  
City-St-Zip: VERO BEACH, FL 32967 US

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

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 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: DAVID GORMAN

D.T

03/16/2009

Electronic Signature of Signing Officer or Director

Date