

**2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

**FILED  
Jul 08, 2006  
Secretary of State**

DOCUMENT# N03000006730

Entity Name: WILLIAM LACASSE JUNIOR FOUNDATION, INC.

**Current Principal Place of Business:**

12951 SW 50 LANE  
MIAMI, FL 33175

**New Principal Place of Business:**

**Current Mailing Address:**

12951 SW 50 LANE  
MIAMI, FL 33175

**New Mailing Address:**

FEI Number: 20-0199431      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired (X)  
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

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

LACASSE, WILLIAM SR.  
12951 SW 50 LANE  
MIAMI, FL 33175      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: BENGOCHEA, CARMEN  
Address: 9270 FOUNTAINBLEAU BLVD.  
City-St-Zip: MIAMI, FL 33172

Title: D      ( ) Delete  
Name: LACASSE, GERALD  
Address: 9270 FOUNTAINBLEAU BLVD.  
City-St-Zip: MIAMI, FL 33172

Title: D      ( ) Delete  
Name: LACASSE, LUIS  
Address: 9270 FOUNTAINBLEAU BLVD.  
City-St-Zip: MIAMI, FL 33172

**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:

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: WILLIAM LACASSE

RA

07/08/2006

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date