

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

FILED
Mar 22, 2006 8:00 am
Secretary of State

03-22-2006 90021 021 ****61.25

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1. Entity Name
CASABLANCA TOWERS, A CONDOMINIUM INC.



Principal Place of Business
600 1ST AVE N SUITE 302
ST. PETERSBURG, FL 33701

Mailing Address
600 1ST AVE N SUITE 302
ST. PETERSBURG, FL 33701

DO NOT WRITE IN THIS SPACE



03172006 No Chg-NP CR2E037 (11/05)

4. FEI Number
20-0376365

Applied For
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75** Additional
Fee Required

6. Name and Address of Current Registered Agent

VILLARI, JOE
1135 SOUTH PASADENA AVENUE
SUITE 107
ST. PETERSBURG, FL 33707

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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 fee if applicable

(NOTE: Registered Agent signature required when registering)

(Date)

**Filing Fee is \$61.25
Due by May 1, 2006**

9. Election Campaign Financing
Trust Fund Contribution ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
PTD
VILLARI, JOSEPH
4201 POINSETTIA DRIVE
ST. PETERSBURG BEACH, FL 33736

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
SD
VILLARI, MONICA
4201 POINSETTIA DRIVE
ST. PETERSBURG BEACH, FL 33706

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

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IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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, changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1030

10, 11, 12, 13, 14