

FILE NOW: FILING FEE IS \$61.25

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Apr 15 1998 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **N04622** (9)
1. Corporation Name
CASA PLAYA CONDOMINIUM ASSOCIATION, INC.

Principal Place of Business 3031 S. ATLANTIC AVE. COCOA BCH FL 32931	Mailing Address 3031 S. ATLANTIC AVE. COCOA BCH FL 32931
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3. Date Incorporated or Qualified 08/09/1984	Applied For ☐	Not Applicable ☐
4. FEI Number 59-2063646		
5. Certificate of Status Desired ☐	\$8.75 Additional Fee Required	
6. Election Campaign Financing Trust Fund Contribution ☐	\$5.00 May Be Added to Fees	
7. Is this nonprofit corporation a homeowners association? ☒ Yes ☐ No		
8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. ☒ Yes ☐ No		

2. Principal Place of Business 21 Suite, Apt. #, etc. 22 City & State 23 Zip 24 Country	2a. Mailing Address 26 Suite, Apt. #, etc. 27 City & State 28 Zip 29 Country
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9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**JESTER, JERRY L
15 E. MERRITT ISLAND CSWY
#307
MERRITT ISLAND FL 32952**

81 Name	85 Zip Code
82 Street Address (P.O. Box Number is Not Acceptable)	
83	
84 City	

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PDD	1.1 TITLE	P/D
NAME	OVERTURE, STEVE	1.2 NAME	MCCASKEY III, COLEMAN
STREET ADDRESS	3031 S ATLANTIC AVE #202	1.3 STREET ADDRESS	3031 S. ATLANTIC AVE. #203
CITY-ST-ZIP	COCOA BEACH FL 32931	1.4 CITY-ST-ZIP	COCOA BEACH FL 32931
TITLE	VD	2.1 TITLE	T/D
NAME	ROSS, DON	2.2 NAME	ROSS, DON
STREET ADDRESS	3031 S ATLANTIC AVE #201	2.3 STREET ADDRESS	3031 S. Atlantic Ave #201
CITY-ST-ZIP	COCOA BEACH FL 32931	2.4 CITY-ST-ZIP	Cocoa Beach, FL 32931
TITLE	TT	3.1 TITLE	VD
NAME	NOTARY, SARA	3.2 NAME	ROSS, PAULETTA
STREET ADDRESS	690 TIMUQUANA DR	3.3 STREET ADDRESS	3031 S. ATLANTIC AVE., #201
CITY-ST-ZIP	MERRITT ISLAND FL 32931	3.4 CITY-ST-ZIP	COCOA BEACH FL 32931
TITLE	D	4.1 TITLE	
NAME	NOTARY, AL	4.2 NAME	
STREET ADDRESS	690 TIMUQUANA DR	4.3 STREET ADDRESS	
CITY-ST-ZIP	MERRITT ISLAND FL 32931	4.4 CITY-ST-ZIP	
TITLE		5.1 TITLE	
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE		6.1 TITLE	
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

14. 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

John E. McCaskey III **John E. McCaskey III** 3/31/98 (401) 783-2835

CR2E037 (10/97)