

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04622

FILED
Mar 29, 2007
Secretary of State

Entity Name: CASA PLAYA CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

3031 S. ATLANTIC AVE.
COCOA BCH, FL 32931

New Principal Place of Business:

Current Mailing Address:

3031 S. ATLANTIC AVE.
COCOA BCH, FL 32931

New Mailing Address:

FEI Number: 59-2063646

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BOYD, SHIRLEY
228 SOUTH COURTENAY PARKWAY
MERRITT ISLAND, FL 32952 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: DS () Delete
Name: MCCASKEY, COLEMAN III
Address: 3031 S ATLANTIC AVE #203
City-St-Zip: COCOA BEACH, FL 32931

Title: DP () Delete
Name: NOTARY, AL
Address: 3031 S ATLANTIC AVE #103
City-St-Zip: COCOA BEACH, FL 32931

Title: DV () Delete
Name: WALKER, KIM
Address: 3031 S. ATLANTIC AVE #102
City-St-Zip: COCOA BCH, FL 32931

Title: T () Delete
Name: FIELD, RUTH
Address: 3031 S. ATLANTIC AVE #101
City-St-Zip: COCOA BEACH, FL 32931

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:

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: COLEMAN E. MCCASKEY III

DS

03/29/2007

Electronic Signature of Signing Officer or Director

Date