

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04622

FILED  
Mar 25, 2009  
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

Title: DVP (X) Delete  
Name: HOLT, LARRY C  
Address: 3031 SOUTH ATLANTIC AVE #402  
City-St-Zip: COCOA BEACH, FL 32931 US

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: DV (X) Change ( ) Addition  
Name: MCCASKEY, COLEMAN E III  
Address: 3031 S ATLANTIC AVE #203  
City-St-Zip: COCOA BEACH, FL 32931

Title: DP (X) Change ( ) Addition  
Name: UVANILE, JOSEPH D  
Address: 3031 S ATLANTIC AVE #402  
City-St-Zip: COCOA BEACH, FL 32931

Title: DS (X) Change ( ) Addition  
Name: UVANILE, JOSEPH C  
Address: 3031 S. ATLANTIC AVE #401  
City-St-Zip: COCOA BEACH, FL 32931

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: COLEMAN E. MCCASKEY III

DV

03/25/2009

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date