

# **2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N05000004462

**FILED**  
**Apr 28, 2010**  
**Secretary of State**

**Entity Name:** LAS CASITAS ON ARRAWANA TOWNHOMES PROPERTY OWNERS ASSOCIATION, INC.

**Current Principal Place of Business:**

1207 N. HIMES AVE.  
SUITE 3  
TAMPA, FL 33607

**New Principal Place of Business:**

**Current Mailing Address:**

1207 N. HIMES AVE.  
SUITE 3  
TAMPA, FL 33607

**New Mailing Address:**

**FEI Number:** 20-4594415

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

UNIQUE PROPERTY SERVICES, INC.  
1207 N. HIMES AVE.  
SUITE 3  
TAMPA, FL 33607 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: PD  
Name: TIERNEY, PATRICK  
Address: 4320 SPINNAKER COVE LANE  
City-St-Zip: TAMPA, FL 33615

Title: SD  
Name: METCALF, CHARLES  
Address: 5601 BAILEY ROAD  
City-St-Zip: TAMPA, FL 33565

Title: TD  
Name: ALONZO, RUSSELL  
Address: 1860 N. FORT HARRISON AVE. APT. 201  
City-St-Zip: CLEARWATER, FL 33755

I hereby 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 all other like empowered.

SIGNATURE: PATRICK TIERNEY

PD

04/28/2010

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

\_\_\_\_\_  
Date