

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT


FILED
Sep 12, 2007 8:00 am
Secretary of State

09-12-2007 90001 022 ****61.25

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08242007 Chg-NP CR2E037 (12/06)

DOCUMENT # N06000000213			
1. Entity Name CASA DE LA PLAYA CONDOMINIUM ASSOCIATION, INC.			
Principal Place of Business 46 NORTH WASHINGTON BLVD STE 1 SARASOTA, FL 34236		Mailing Address 46 NORTH WASHINGTON BLVD STE 1 SARASOTA, FL 34236	
2. Principal Place of Business - No P.O. Box #		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country
4. FEI Number		<input checked="" type="checkbox"/> Applied For <input type="checkbox"/> Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent		7. Name and Address of New Registered Agent	
LPS CORPORATE SERVICES, INC. 46 NORTH WASHINGTON BLVD STE 1 SARASOTA, FL 34236		Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code	
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 _____ DATE _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>			
Filing Fee is \$61.25 Due by September 14, 2007		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	
Make check payable to Florida Department of State			
10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE/T/D NAME STREET ADDRESS CITY-ST-ZIP	John R. Blouin <input type="checkbox"/> Delete 831 West North Street Hinsdale, IL 60521	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE/P/S/D NAME STREET ADDRESS CITY-ST-ZIP	Janice Blouin <input type="checkbox"/> Delete 831 West North Street Hinsdale, IL 60521	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE/D NAME STREET ADDRESS CITY-ST-ZIP	Janelle Drew <input type="checkbox"/> Delete 240 East Ogden Ave. Apt 103 Hinsdale, IL 60521	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

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 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: John R. Blouin John R. Blouin
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

9/5/2007 1-847-274-6288
Date Daytime Phone #