

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N08000004621

FILED
Jan 12, 2009
Secretary of State

Entity Name: CASA LINDA PARK CONDOMINIUM ASSOCIATION, INC

Current Principal Place of Business:

11985 SW 135 TER
MIAMI, FL 33186

New Principal Place of Business:

Current Mailing Address:

11985 SW 135 TER
MIAMI, FL 33186

New Mailing Address:

FEI Number:

FEI Number Applied For ()

FEI Number Not Applicable (X)

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DOUER, ROBERTO
1108 KANE CONCOURSE
SUITE 302
BAY HARBOR, FL 33154 US

Name and Address of New Registered Agent:

DOUER, ROBERTO
11985 SW 135 TER
MIAMI, FL 33186 US

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:

01/12/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: DOUER, ROBERTO
Address: 1108 KANE CONCOURSE, SUITE 302
City-St-Zip: BAY HARBOR, FL 33154

Title: VSD () Delete
Name: DOUER, DANIEL
Address: 1108 KANE CONCOURSE, SUITE 302
City-St-Zip: BAY HARBOR, FL 33154

Title: TD (X) Delete
Name: DOUER, FERNANDO
Address: 1108 KANE CONCOURSE, SUITE 302
City-St-Zip: BAY HARBOR, FL 33154

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: DOUER, ROBERTO
Address: 11985 SW 135 TER
City-St-Zip: MIAMI, FL 33186

Title: VSD (X) Change () Addition
Name: DOUER, DANIEL
Address: 1108 KANE CONCOURSE, SUITE 200
City-St-Zip: BAY HARBOR, FL 33154

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: ROBERTO DOUER

PD

01/12/2009

Electronic Signature of Signing Officer or Director

Date