

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Apr 18, 2005 8:00 am
Secretary of State

04-18-2005 90280 038 ****61.25

DOCUMENT # N12936
 1. Entity Name
 CASA SUL LAGO MAINTENANCE ASSOCIATION, INC.



Principal Place of Business: 19963 VILLA LANTE PL, BOCA RATON FL 33431
 Mailing Address: PO BOX 970878, BOCA RATON FL 33497 US



2. Principal Place of Business: Suite, Apt. #, etc.
 3. Mailing Address: Suite, Apt. #, etc.

1st MOORE CR2E037 (10/04)

City & State

4. FEI Number: 59-2737837
 Applied For: Not Applicable

Zip: Country

5. Certificate of Status Desired: \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent
 NUDELBERG, BRENDA
 19963 VILLA LANTE PLACE
 BOCA RATON FL 33431

7. Name and Address of New Registered Agent
 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: _____ (NOTE: Registered Agent signature required when reinstating) DATE: _____

FILE NOW: FEE IS \$61.25
Due By May 1, 2005

9. Election Campaign Financing Trust Fund Contribution: \$5.00 May Be Added to Fees

Make Check Payable to Florida Department of State

10. OFFICERS AND DIRECTORS

TITLE: PD	NAME: NUDELBERG, BRENDA	STREET ADDRESS: 19963 VILLA LANTE PLACE	CITY-ST-ZIP: BOCA RATON FL 33431	<input type="checkbox"/> Delete
TITLE: VPD	NAME: BIFANO, ANTHONY	STREET ADDRESS: 19967 VILLA LANTE PLACE	CITY-ST-ZIP: BOCA RATON FL 33431	<input type="checkbox"/> Delete
TITLE: P	NAME: NUDELBERG, BRENDA	STREET ADDRESS: 19963 VILLA LAWAC BLVD	CITY-ST-ZIP: BOCA RATON FL	<input checked="" type="checkbox"/> Delete
TITLE:	NAME:	STREET ADDRESS:	CITY-ST-ZIP:	<input type="checkbox"/> Delete
TITLE:	NAME:	STREET ADDRESS:	CITY-ST-ZIP:	<input type="checkbox"/> Delete
TITLE:	NAME:	STREET ADDRESS:	CITY-ST-ZIP:	<input type="checkbox"/> Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

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"/> Change <input type="checkbox"/> Addition
TITLE: Treasurer	NAME: Robert Garick	STREET ADDRESS: 19987 Villa Lante Pl.	CITY-ST-ZIP: Boca Raton, FL 33431	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
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"/> Change <input type="checkbox"/> Addition
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 exemption stated in Section 119.07(3)(i), 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: *Robert A. Garick* TREASURER Date: 4/11/05 Daytime Phone #