

# 2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Apr 27, 2005 8:00 am**  
**Secretary of State**

04-27-2005 90324 028 \*\*\*\*61.25

<b>DOCUMENT # N13590</b> 1. Entity Name <b>CASCADE OAKS HOMEOWNERS' ASSOCIATION, INC.</b>			
Principal Place of Business <b>PMB 739 4546 S. SEMORAN BLVD ORLANDO, FL 32822-2408 US</b>		Mailing Address <b>PMB 739 4546 S. SEMORAN BLVD ORLANDO, FL 32822-2408 US</b>	
2. Principal Place of Business <b>135 W. PINEVIEW ST.</b> Suite, Apt. #, etc.		3. Mailing Address <b>135 W. Pineview St.</b> Suite, Apt. #, etc.	
City & State <b>Altamonte Sp, FL</b>		City & State <b>Altamonte Sp, FL</b>	
Zip <b>32714</b>	Country <b>USA</b>	Zip <b>32714</b>	Country <b>USA</b>
4. FEI Number <b>59-2645400</b>		Applied For <input type="checkbox"/> Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/> <b>\$8.75 Additional Fee Required</b>			
6. Name and Address of Current Registered Agent <b>PRESIDENTIAL GROUP SOUTH, INC. 135 W PINEVIEW ST ALTAMONTE SPRINGS, FL 32714</b>		7. Name and Address of New Registered Agent Name: _____ Street Address (P.O. Box Number is Not Acceptable): _____ City: _____ <b>FL</b> 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 _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>			
<b>Filing Fee is \$61.25 Due by May 1, 2005</b>		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00 May Be Added to Fees</b>	
<b>Make check payable to Florida Department of State</b>			
<b>10. OFFICERS AND DIRECTORS</b>		<b>11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10</b>	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>D</b> <b>SIERRA, EDWIN O</b> <b>8234 SUMPTER CT.</b> <b>ORLANDO, FL 32822</b>	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>Katherine Suarez T</b> <b>8334 Cascade Oaks Dr</b> <b>Orlando, FL 32822</b>
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>VP</b> <b>TIPTON, MARILYN</b> <b>8222 SUMPTER CT.</b> <b>ORLANDO, FL 32822</b>	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>R</b> <b>ROSARIO, ANTONIO</b> <b>8269 CASCADE OAKS DR.</b> <b>ORLANDO, FL 32822</b>	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>T</b> <b>ARIAS-SIERRA, OLGA</b> <b>8234 SUMPTER CT.</b> <b>ORLANDO, FL 32822</b>	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>P</b> <b>RIDGEWAY, PAMELA</b> <b>8208 CASCADE OAKS DR.</b> <b>ORLANDO, FL 32822</b>	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>D</b> <b>BERRY, MICHAEL</b> <b>4007 MEANDERING CT.</b> <b>ORLANDO, FL 32822</b>	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" 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.			
<b>SIGNATURE:</b> <u>Marilyn Tipton</u> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>		<u>4-21-05</u> <small>Date</small>	
<small>Daytime Phone #</small>			