## FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

## **Katherine Harris**

Secretary of State
DIVISION OF CORPORATIONS

## FILED Apr 16, 1999 8:00 am Secretary of State

04-16-1999 90067 005 \*\*\*\*61.25

| DOCH | MENT       | # | NI1 | 6070 |  |
|------|------------|---|-----|------|--|
|      | IVIE I A I | # | IVI | 0313 |  |

1. Corporation Name

CASABLANCA VILLAS CONDOMINIUM ASSOCIATION, INC.

| Principal Place of Business |  |  |  |  |  |  |
|-----------------------------|--|--|--|--|--|--|
| 3420 EAST MARITANA DR.      |  |  |  |  |  |  |
| ST. PETERSBURG FL 33706     |  |  |  |  |  |  |

2. Principal Place of Business

Mailing Address

6404 67TH DRIVE EAST PALMETTO FL 34221 US

2a. Mailing Address



3. Date Incorporated or Qualifed

| 21             | * * · · · · · · · · · · · · · · · · · ·              | 26                                 | <del></del>   |                      | 09/24/1986                             |                |              |                   |
|----------------|--|------------------------------------|---------------|----------------------|--|----------------|--------------|-------------------|
| Suite, Apt.    | #, etc.  | Suite, Apt. #, etc.                |               |                      | 4. FEI Number                          | ·              | Apr          | olied For         |
| 22             | •  | 27                                 |               |                      | 59-2872566                             |                | Not          | Applicable        |
| City & Stat    | e  | City & State                       |               |                      | 5. Certificate of Status Desired       |                | \$8.75 A     |                   |
| 23             |  | 28                                 |               |                      | 5. Certificate of Status Desired       |                | Fee Re       | quired            |
| Zip            | Country  | Zip                                | Country       |                      | 6. Election Campaign Financing         | '              | \$5.00       |                   |
| 24             | 25   | 29 30                              | <u> </u>      |                      | Trust Fund Contribution                |                | Added to     | Fees              |
|                | 9. Name and Address of Current                       | Registered Agent                   | <del></del>   |                      | 10. Name and Address of New            | Registered A   | gent         |                   |
|                |  |                                    | 81            | Name                 |  |                |              |                   |
| WERTZ. (       | CORDELL E.   |                                    | 82            | Street Addr          | ess (P.O. Box Number is Not Accep      | table)         |              |                   |
|                | RITANA DRIVE, EAST, #3                               |                                    |               |                      |  |                |              |                   |
| ST. PETE       | RSBURG FL 33706                                      |                                    | 83            |                      |  |                |              |                   |
| 01. 12.12.     |  |                                    | 84            | City                 |  |                | 85 Zip C     | ode.              |
|                |  |                                    | **            | City                 |  | FL             | 03 2.5       | ,006              |
| 11. Pursuant   | to the provisions of Sections 617.0502               | and 617.1508, Florida Statutes,    | the above     | -named corpo         | oration submits this statement for th  | e purpose of o | hanging its  | registered        |
| office or r    | registered agent, or both, in the State o            | if Florida. Such change was auth   | iorized by    | the corporatio       | on's board of directors, I hereby acco | ept the appoin | tment as reg | jisterea          |
|                |  | 5110 51, 5000011 517.0000, 1 WHO   | _ 3.3.3.00.   | •                    |  |                |              |                   |
| SIGNATURE      | Signature, typed or printed name of registered agent | and title if applicable. (NOTE: Re | gistered Agen | t signature required | d when reinstating)                    | DATE           |              | <del></del>       |
| 12.            | OFFICERS AND   | DIRECTORS                          | 13.           |                      | ADDITIONS/CHANGES TO O                 | FFICERS AN     |              |                   |
| TITLE          | STD  | ☐ DELETE                           | 1.1 TITLE     |                      |  |                | Change       | Addition Addition |
| NAME           | WERTZ, PATRICIA A.                                   | ,                                  | 1.2 NAME      |                      |  |                |              |                   |
| STREET ADDRESS | 3420 MARITANA DR E #3                                |                                    | 1.3 STREET    | ADDRESS              |  |                |              |                   |
| CITY-ST-ZIP    | ST. PETERSBURG FL                                    |                                    | 1.4 CITY-ST   | r-ZIP                |  |                |              |                   |
| TITLE          | VD   | ☐ DELETE                           | 2.1 TITLE     |                      |  |                | Change       | Addition          |
| NAME .         | WERTZ, CORDELL E                                     |                                    | 2.2 NAME      |                      |  |                |              |                   |
| STREET ADDRESS | 1  |                                    | 2.3 STREET    | ADDRESS              |  |                |              |                   |
| CITY-ST-ZIP    | ST. PETERSBURG FL 33706                              |                                    | 2. 4 CITY-S   | T-ZIP                |  |                |              |                   |
| TITLE          | D ·  | ☐ DELETE                           | 3.1 TITLE     |                      |  |                | ☐ Change     | ☐ Addition        |
| NAME           | MC CURDY DAN   |                                    | 3.2 NAME      | ĺ                    |  |                |              |                   |
| STREET ADDRESS |  |                                    | 3.3 STREET    | ADDRESS              |  |                |              |                   |
| CITY-ST-ZIP    | ST. PETERSBURG FL                                    |                                    | 3.4. CITY-S   | 1                    |  |                |              |                   |
| TITLE          | D D  | ☐ DELETE                           | 4.1 TITLE     | <del></del>          |  |                | Change       | Addition          |
| NAME           | ALOISIO, VITO  | •                                  | 4, 2 NAME     |                      |  |                |              |                   |
| STREET ADDRESS | A 400 A 444 THE 444 A TO 15 A 40                     |                                    | 4.3 STREET    | ADDRESS              |  |                |              |                   |
| CITY-ST-ZIP    | ST. PETERSBURG FL 33706                              |                                    | 4.4 CITY-ST   |                      |  |                |              |                   |
| TITLE          | PD   | DELETE                             | 5.1 TITLE     |                      |  |                | Change       | Addition          |
| NAME           | DIEHLS, CARL   | · ·                                | 5.2 NAME      |                      |  |                |              |                   |
|                | 3420 MRITANA DR E-5                                  |                                    | 5.3 STREET    | ADDRESS              |  |                |              |                   |
| day and again  |  |                                    | 5,4 CITY-\$1  |                      |  |                |              |                   |
| CITY-ST-ZIP:   | a to the state of                                    | ☐ DELETE                           | 6.1 TITLE     |                      | 3 /                                    |                | Change       | Addition          |
| THE STATE OF   | SIDTIT E   | 7 0000.2                           | 6.2 NAME      |                      | •                                      |                |              |                   |
| NAME           |  |                                    | 6.3 STREET    | ANDRESS              | ^                                      |                |              |                   |
| STREET ADDRESS |  |                                    |               |                      |  |                |              |                   |
| CITY-ST-ZIP    | 1  |                                    | 6.4 CITY-ST   | 1-212 / -            |  |                |              |                   |

14. 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

MATURE AND TYPED OR PRINTED NAME OF SIGNING PRICE OR DIRECTOR Date Date Daytime Phone #

-CR2E037 (11/98)