2004 NOT-FOR-PROFIT CORPORATION

FILED

	ANNUAL R	Apr 15	Apr 15, 2004 8:00 am				
DOCUMENT # N16979 1. Entity Name				Apr 15, 2004 8:00 am Secretary of State 04-15-2004 90036 047 ****61.25			•
CASABLINC.	ANCA VILLAS CONDOMINIL	JM ASSOCIATION,		04-15-200)4 90036 047 ** *	**61.25	
Principal Plac	ce of Business	Mailing Address					
	MARITANA DR. SBURG FL 33706	3420 #5 PALMETTO FL 34221 US				RII BIBII BIBIILI I	
2. Principal Place of Business		3. Mailing Address 3420 MARLETANA D		DR. E			
Suité, Apt. #, etc.		Suite Apt. #, etc.		MOORE	CR2E037 (1	1/03)	
City & State		ST. PETE BEACH FL		4. FEI Number 59-2872566 Applied Not Applied		ed For oplicable	
Zip	Country	33706	PINELLA <	<u> </u>	Fee	75 Addition Required	nal
	6. Name and Address of Current	Registered Agent	Name n	7, Name and Address of New Registered Agent			
WERTZ, PATRICIA			B	ARBARA - UL	EHLS	#**	
342	O MÁRITANA DR. É #5 NT PETERSBURG FL 33706		Street Addre	iss (P.O. Box Number is Not Accept M.A.R.I.T.A.N.A.	DR. E	457	=3
			City 57	PETE BE	ACH FL	Zio Code	66
	e named entity submits this statement fo	or the purpose of changing its	egistered office or reg			ar with, and	accept
the obliga	itions of registered agent.						
SIGNATURE	Barbara dich	le)					
JIGNATORE	Signature, typed or printed name of registered agent	and (itle if applicable. (NOTE:	Registered Agent signature re	quired when reinstating)	DATE	•	
	FILE NOW: FEE IS \$61.25 - Due By May 1, 2004	9. Election Cam Trust Fund Co	· · -	\$5.00 May Be Added to Fees	Make Check Pa lorida Departme	yable to	
10.	OFFICERS AND DI	RECTORS	11.	ADDITIONS/CHANGES TO OF	FICERS AND DIRECT	ORS IN 10	SOURCE STATE
TITLE	STD	☐ Delete	TITLE			Change [Addition
NAME	DIEHLS, BARBARA L 3420 MARITANA DR. È #5		NAME				
STREET ADDRESS CITY-ST-ZIP	SAINT PETERSBURG FL 33706		STREET ADDRESS CITY-ST-ZIP				
TITLE	VD	☐ Delete	TITLE			Change [Addition
NAME	ROSSI, THOMAS	L1 Detete	NAME		L	Custian [_	3 Auguston
STREET ADDRESS			STRÉET ADDRESS				
CITY-ST-ZIP	ST. PETERSBURG FL 33706		CITY-ST-ZIP				
دند در ماسد	D BLAIR, DILLON	Delete	TITLE			Change [] Addition
NAME STREET ADDRESS	- 100 F 144 BIT 114 BB 4		NAME STREET ADDRESS		•		
CITY-ST-ZIP	SAINT PETERSBURG FL 33706		CITY-ST-ZIP				
TITLE	PD	☐ Delete	TITLE	· · · · · · · · · · · · · · · · · · ·	П	Change [Addition
NAME	PRINCE, ED	<u> </u>	NAME				
STREET ADDRESS	3420 E. MARITANA DR. #4 ST. PETERSBURG FL 33706		STREET ADDRESS				
CITY-ST-ZIP	D = 33,00		CITY-ST-ZIP				_
TITLE	DIEHLS, CARL	☐ Delete	TITLE			Change	Addition
NAME STREET ADDRESS	3420 MRITANA DR E-5		NAME STREET ADDRESS				
CITY-ST-ZIP	ST. PETERSBURG FL 33706		CITY-ST-ZIP				
TITLE	D ALCICO MITO	☐ Delete	TITLE			Change [Addition
NAME	ALOISO, VITO 3420 E. MARITANA DR. #2		NAME		_		
STREET ADDRESS	CAINT DETERONING EL 2270C		STREET ADDRESS				

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.

CITY-ST-ZIP

SIGNATURE: Ballow BARBARA DIEHLS
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

SAINT PETERSBURG FL 33706

CITY-ST-ZIP

227-360-2842 Daylime Phone #

Date