2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 28, 2009
Secretary of State

DOCUMENT# N32579

Entity Name: LAS CASAS NORTH OWNERS ASSOCIATION, INC.

Current Principal Place of Business:

503 ALBEE FARM ROAD
VENICE, FL 34285 US

New Principal Place of Business:

Current Mailing Address:

503 ALBEE FARM ROAD
VENICE, FL 34285 US

New Mailing Address:

FEI Number: 65-0167657 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

HEATHER, NESTLE
503 ALBEE FARM RD #5
VENICE, FL 34285 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent — Date

OFFICERS AND DIRECTORS:

Title:	V	( ) Delete
Name:	BRYANT, PATRICIA	
Address:	503 ALBEE FARM ROAD, LOT #14	
City-St-Zip:	VENICE, FL 34285	
Title:	P	( ) Delete
Name:	NESTLE, HEATHER	
Address:	503 ALBEE FARM RD #5	
City-St-Zip:	VENICE, FL 34285	
Title:	S	( ) Delete
Name:	DEMMING, CONSTANCE	
Address:	503 ALBEE FARM RD #22	
City-St-Zip:	VENICE, FL 34285	
Title:	D	( ) Delete
Name:	GANDALL, NORMA	
Address:	503 ALBEE FARM RD #27	
City-St-Zip:	VENICE, FL 34285	
Title:	AT	( ) Delete
Name:	JORGESON, CHARLOTTE	
Address:	1921 S BAKER ROAD	
City-St-Zip:	BALSAM LAKE, WI 54810	

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
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: NORMA J GANDALL TREA 04/28/2009

Electronic Signature of Signing Officer or Director — Date