2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N40994

FILED Feb 04, 2005 Secretary of State

Entity Name: CASA MARINA ASSOCIATION, INC.

Current Principal Place of Business:			New Prince	New Principal Place of Business:	
4371 BAY #511	BEACH LN				
	ERS, FL 33931	I US			
Current Mailing Address:			New Maili	New Mailing Address:	
	BEACH LN				
#511 Fort Mye	ERS, FL 33931	I US			
FEI Number:	65-0237405	FEI Number Applied For ()	FEI Number Not App	licable () Certificate of Status Desired ()	
Name and	Address of C	urrent Registered Agent:	Name and	Address of New Registered Agent:	
AMADIO, MICHAEL 4371 BAY BEACH LANE #414 FORT MYERS BEACH, FL 33931 US			4371 BAÝ #414	AMODIO, MICHAEL 4371 BAY BEACH LANE #414 FORT MYERS BEACH, FL 33931 US	
The above				its registered office or registered agent, or both,	
SIGNATURE: MICHAEL AMODIO				02/04/2005	
	Electron	ic Signature of Registered Ag	ent	Date	
OFFICERS	S AND DIREC	TORS:	ADDITION	IS/CHANGES TO OFFICERS AND DIRECTORS	
Title: Name: Address: City-St-Zip:	CISZEWSKI, CA 4371 BAY BEAC		Title: Name: Address: City-St-Zip:	()Change ()Addition	
Title: Name: Address: City-St-Zip:	AMODIO, MICH 4371 BAY BEAC		Title: Name: Address: City-St-Zip:	DT (X) Change () Addition AMODIO, MICHAEL D 4371 BAY BEACH LANE, #414 FORT MYERS BEACH, F 33931 US	
Title: Name: Address: City-St-Zip:	VETTESE, ALDO 4371 BAY BEAC		Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	IMIG, ROBERT 4371 BAY BEAC	Delete CH LANE #311 BEACH, FL 33931 US	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address:	DS () GRIBBLE, BON 4371 BAY BEAG		Title: Name: Address:	() Change () Addition	

I hereby certify that the information supplied with this filing does not qualify for the 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 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: MICHAEL AMODIO DT 02/04/2005