

# 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

**FILED**  
**May 08, 2006 8:00 am**  
**Secretary of State**

05-08-2006 90275 020 \*\*\*\*61.25

**DOCUMENT # N92000000073**

1. Entity Name

THE VILLAS AT EAGLES POINT CONDOMINIUM  
ASSOCIATION, INC.



Principal Place of Business  
2477 STICKNEY PT RD  
118 A  
SARASOTA FL 34231

Mailing Address  
CASEY CNDOMINIUM MGMT  
4370 S TAMIAMI TRAIL, # 156X  
SARASOTA FL 34231



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

102

1st MOORE

CR2E037 (10/05)

City & State

City & State

4. FEI Number

65-0369011

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired ☐

**\$8.75** Additional  
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

CASEY CONDOMINIUM MGMT  
4370 S TAMIAMI TRAIL,  
# 156  
SARASOTA FL 34231

Name

Street Address (P.O. Box Number is Not Acceptable)

Ste-102

City

FL

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

*Car B. Hume*  
Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when terminating)

DATE

*4/20/06*

**FILE NOW: FEE IS \$61.25**  
**Due By May 1, 2006**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$5.00** May Be  
Added to Fees

**Make Check Payable to**  
**Florida Department of State**

10. OFFICERS AND DIRECTORS

TITLE PD ☐ Delete  
NAME TRUMAN, MENELEE  
STREET ADDRESS 1701 STARLING DR  
CITY-ST-ZIP SARASOTA FL 34231

TITLE VSD ☐ Delete  
NAME LOOMIS, MARGARET  
STREET ADDRESS 1709 STARVING DRIVE  
CITY-ST-ZIP SARASOTA FL 34231

TITLE SD ☒ Delete  
NAME KAHN, RICHARD  
STREET ADDRESS 1723 STARLING DR  
CITY-ST-ZIP SARASOTA FL 34231

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE VSD ☒ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE TD ☐ Change ☒ Addition  
NAME WHITE, SALLY  
STREET ADDRESS 1721 STARLING DRIVE  
CITY-ST-ZIP SARASOTA, FL 34231

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, 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.

SIGNATURE:

*Truman Menefee*

4-20-2006