

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N93000003859

FILED  
Jun 27, 2009  
Secretary of State

**Entity Name:** LA CASA AMOROSA HOMEOWNERS ASSOCIATION, INC.

**Current Principal Place of Business:**

97 NIEMIRA AVE.  
N. INDIALANTIC, FL 32903

**New Principal Place of Business:**

**Current Mailing Address:**

C/O TONY ZIZZO  
3502 HAWKE DR.  
MELBOURNE, FL 32935

**New Mailing Address:**

C/O TONY ZIZZO  
3502 HAWK DR.  
MELBOURNE, FL 32935

**FEI Number:** 59-3366207 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**  
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

**Name and Address of Current Registered Agent:**

ZIZZO, TONY  
3502 HAWKE DRIVE  
MELBOURNE, FL 32935 US

**Name and Address of New Registered Agent:**

ZIZZO, TONY  
3502 HAWK DRIVE  
MELBOURNE, FL 32935 US

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: \_\_\_\_\_

06/27/2009

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: SD ( ) Delete  
Name: WHITCOMB, JULIA  
Address: 97 NIEMIRA AVE, UNIT E  
City-St-Zip: INDIALANTIC, FL 32903

Title: PD ( ) Delete  
Name: ZIZZO, TONY  
Address: 3502 HAWK DRIVE  
City-St-Zip: MELBOURNE, FL 32935

Title: D ( ) Delete  
Name: MAYCOCK, JOHN  
Address: 97 NIEMIRA AVE, UNIT D  
City-St-Zip: INDIALANTIC, FL 32903

**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:

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: ANTHONY ZIZZO

PD

06/27/2009

Electronic Signature of Signing Officer or Director

Date