## **2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT # NOADOOD5334

## Mar 12, 2007 8:00 am Secretary of State 03-12-2007 90374 030 \*\*\*\*61.25

1. Entity Nam LA CASA	ACTIVITY ASSOCIATION, I									
				3323						
Principal Plac 300 EL PRAI NORTH PORT	DO 🤏	Mailing Address 300 EL PRADO NORTH PORT, FL 3428	7		400	34495				
s."	i y									
2. Principal P	lace of Business - No P.O. Box #	3. Mailing Address								
The state of the s		Suite, Apt. #, etc.	Suite, Apt. #, etc.		03062007 C	hg-NP	CR2E037	7 (12/06)		
City & Stat	е •	City & State			4. FEI Number	76	•	_ <del>                                    </del>	oplied For	
Zip	Country	Zip	Country		65-052637	<del></del>		No. 18.75 Add	ot Applicable	
	6. Name and Address of Current R	egistered Acent			5. Certificate of S		<u> </u>	ee Require		
		sdistered without	Name		7. Name and Ade	Iress of New Re	egistered A	gent	<del></del>	
KORP, WILLIAM R. 333 S TAMIAMI TRAIL			Street A	Street Address (P.O. Box Number is Not Acceptable)						
SUITE 199 VENICE, FL 34285			-			·····				
,			City				FL	Zip Cod	le	
	named entity submits this statement for tions of registered agent.	the purpose of changing its r	registered office o	r registered	l agent, or both, in	the State of Flor		 ımiliar with,	and accept	
SIGNATURE .	Signature, typed or printed name of registered agent an	d title if applicable. (NOTE:	Registered Agent signal	ture required wh	nen reinstating)		DITE	<del> </del>	<del></del>	
				ia o regunea mi	errensamy/		DATE			
	Filing Fee is \$61.25 Due by May 1, 2007	9. Election Cam Trust Fund Co	paign Financing	_ \$	5.00 May Be dded to Fees		ike check da Departi			
10.	Due by May 1, 2007 OFFICERS AND DIRE	9. Election Cam Trust Fund Co	paign Financing	□ <b>\$</b>	5.00 May Be	Florie	ike check da Departi	ment of S	tate	
TITLE NAME STREET ADDRESS	OFFICERS AND DIRE PD FREILER, DOROTHY 324 ESTRADA	9. Election Cam Trust Fund Co	paign Financing ontribution.  11.  TITLE NAME STREET ADDRESS	□ AO  AO  FRY €	5.00 May Be dded to Fees DITIONS/CHANG	Florid SES TO OFFICER	ake check da Departi IS AND DIR	ment of S	tate	
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TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	Due by May 1, 2007  OFFICERS AND DIRE  PD FREILER, DOROTHY 324 ESTRADA NORTH PORT, FL 34287  VP BORST, MARY 228 EL PRADO NORTH PORT, FL 34287  T	9. Election Cam Trust Fund Co ECTORS	paign Financing ontribution.  11.  TITLE NAME STREET ADDRESS CITY-ST-ZIP  TITLE NAME STREET ADDRESS CITY-ST-ZIP  TITLE	D AD  FRYE 118 E NORT  PD BORS 228 NORT	5.00 May Be dded to Fees  DITIONS/CHANGEL YERM FL TAN GOTH PORT,  ST MARY	Florida SES TO OFFICER  FL 342  ADO FL 344	S AND DIR	ment of S	tate i 10	
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ATELERA

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: Unto Van Tarsell Clinton Van Tassell
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

941-426-6647