

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N94000005334

FILED
Jan 07, 2009
Secretary of State

Entity Name: LA CASA ACTIVITY ASSOCIATION, INC.

Current Principal Place of Business:

300 EL PRADO
NORTH PORT, FL 34287

New Principal Place of Business:

Current Mailing Address:

300 EL PRADO
NORTH PORT, FL 34287

New Mailing Address:

FEI Number: 65-0526376

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

KORP, WILLIAM R
333 S TAMiami TRAIL
SUITE 199
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: D () Delete
Name: FRYER, VERN
Address: 118 EL TANGO
City-St-Zip: NORTH PORT, FL 34287

Title: PD () Delete
Name: BORST, MARY
Address: 228 EL PRADO
City-St-Zip: NORTH PORT, FL 34287

Title: TD () Delete
Name: VANTASSELL, CLINTON
Address: 469 LOMA LINDA
City-St-Zip: NORTH PORT, FL 34287

Title: VD () Delete
Name: FREILER, TONY
Address: 324 ESTRADA
City-St-Zip: NORTH PORT, FL 34287

Title: SD () Delete
Name: DINGES, PAT
Address: 321 LA ROSAS
City-St-Zip: NORTH PORT, FL 34287

Title: D () Delete
Name: ESPOSITO, ARLENE
Address: 703 DEL LUNA
City-St-Zip: NORTH PORT, FL 34287

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: FREEMAN, LIZ
Address: 640 ALVARADO
City-St-Zip: NORTH PORT, FL 34287

Title: D (X) Change () Addition
Name: AMOS, RICK
Address: 432 TARDE LOGO
City-St-Zip: NORTH PORT, FL 34287

Title: PD (X) Change () Addition
Name: VANTASSELL, CLINTON
Address: 469 LOMA LINDA
City-St-Zip: NORTH PORT, FL 34287

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: TD (X) Change () Addition
Name: ESPOSITO, ARLENE
Address: 703 DEL LUNA
City-St-Zip: NORTH PORT, FL 34287

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: CLINTON VAN TASSELL

PD

01/07/2009

Electronic Signature of Signing Officer or Director

Date