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

SIGNATURE:

## Apr 13, 2006 8:00 am Secretary of State DOCUMENT # N97000002760 1. Entity Name 04-13-2006 90303 048 \*\*\*\*61.25 CASSIA COMMUNITY CLUB, INC. Principal Place of Business Mailing Address 29245 EAST STATE ROAD 44 29245 EAST STATE ROAD 44 EUSTIS FL 32736-9552 EUSTIS FL 32736-9552 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 1st MOORE CR2E037 (10/05) Applied For City & State City & State 4. FEI Number 59-3497561 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent ames Street Address (P.O. Box Number is Not Acceptable) TAMMY, RODGERS P. O. BOX 192 PAISLEY, FL 32767 City 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 (NOTE: Registered Agent signature required when reinstating) 17.8 "是"、大概的大学。 FILE NOW: FEE IS \$61.25 9. Election Campaign Financing \$5.00 May Be Make Check Payable to Trust Fund Contribution. Due By May 1, 2006 Florida Department of State Added to Fees OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 10 11. Delete TITLE TITLE ☐ Change Addition ROSENBERG, MURRAY NAME NAME Diane -STREET ADDRESS 37031 CASSIA CHURCH ROAD STREET ADDRESS 36025 CITY-ST-ZIP EUSTIS FL 32736 CITY-ST-ZIP VD TITLE ☐ Delete TITLE Change ☐ Addition ROYAL, LONNIE E NAME NAME STREET ADDRESS 25409 ROLLING OAK ROAD STREET ADDRESS SORRENTO FL 32776 CITY-ST-ZIP CiTY-ST-ZIP TITLE TITI F Director Change Deiere ☐ Addition NAME RODGERS, TAMMY NAME STREET ADDRESS P.O. BOX 192 STREET ADDRESS CITY-ST-ZIP PAISLEY FL 32767 CITY-ST-ZIP secretary Powell Addition Delete TITLE rlene tower. 511 Ashley Ct. ROSENBERG, MURRAY NAME NAME STREET ADDRESS 37031 CASSIA CHURCH RD. STREET ADDRESS Grand Island, FL 32735 CITY-ST-ZIP CITY-ST-ZIP EUSTIS FL 32736 nartha Whitley Delete TITLE TITLE ☐ Change Addition BOGUE, JOHN MAME NAME 1700 Poinciana st. PO BOX 524 STREET ADDRESS STREET ADDRESS TAVARES FL 32778 CITY-ST-ZIP CITY-ST-ZIP Delete ☐ Change TITLE TITLE Addition NAME GNANN, ROBERT NAME 31426 COLBY PL STREET ADDRESS STREET ADDRESS SORRENTO FL 32776 CITY-ST-ZIP CITY-ST-ZIP 12. I hereby certify that the information supplied with this filling 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.

FILED