2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Sep 09, 2008 08:00 AM
Secretary of State

DOCUMENT # N99000003638

1. Entity Name
CASA GRANDE TOWERS MASTER ASSOCIATION, INC.

Principal Place of Business	Mailing Address
1699 CORAL WAY SUITE 302 MIAMI, FL 33145	1699 CORAL WAY SUITE 302 MIAMI, FL 33145

DO NOT WRITE IN THIS SPACE

06052008 No Chg-NP CR2E037 (4/06)

4. FEI Number
65-0992840

☐ Applied For
☐ Not Applicable

5. Certificate of Status Desired ☐ $8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

RODRIGUEZ, ANITA
1699 CORAL WAY, STE 302
MIAMI, FL 33145

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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 _____ DATE
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

Filing Fee is $61.25
Due by September 12, 2008

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	PD
NAME	ALMEIDA, FLORENTINO
STREET ADDRESS	1699 CORAL WAY SUITE 302
CITY-ST-ZIP	MIAMI, FL 33145
TITLE	SD
NAME	RODRIGUEZ-TEJERA, ANITA TEJON
STREET ADDRESS	1699 CORAL WAY SUITE 302
CITY-ST-ZIP	MIAMI, FL 33145
TITLE	D
NAME	CAPOTE, ERNESTO
STREET ADDRESS	1699 CORAL WAY SUITE 302
CITY-ST-ZIP	MIAMI, FL 33145
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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: _____ 6/16/08 305 856 2547 EXT. 109
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

$70.-