

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P97000081769

FILED
May 15, 2007
Secretary of State

Entity Name: LAS CASITAS, ARCHITECTURE & PLANNING, INC.

Current Principal Place of Business:

2451 BEE RIDGE RD
SARASOTA, FL 34239 US

New Principal Place of Business:

Current Mailing Address:

2451 BEE RIDGE RD
SARASOTA, FL 34239 US

New Mailing Address:

FEI Number: 65-0805269

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GARCIA, XAVIER E SR
401 N. POINT ROAD UNIT 302
OSPREY, FL 34229 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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: O () Delete
Name: GARCIA, XAVIER E SR
Address: 401 N. POINT ROAD UNIT 302
City-St-Zip: OSPREY, FL 34229

Title: O () Delete
Name: GARCIA, ALICIA E
Address: 401 N. POINT ROAD UNIT 302
City-St-Zip: OSPREY, FL 34229

Title: O () Delete
Name: HATFIELD, RAY
Address: 1210 RESERVE WAY APT. 105
City-St-Zip: NAPLES, FL 34105

Title: O () Delete
Name: GARCIA, XAVIER E JR.
Address: 2852 JAMAICA STREET
City-St-Zip: SARASOTA, FL 34231

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:

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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: XAVIER GARCIA SR

PRES

05/15/2007

Electronic Signature of Signing Officer or Director

Date