

2024 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 731679

Entity Name: CASA CLARA CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

201 EAST OCEAN DRIVE
KEY COLONY BCH, FL 33051-0299

Current Mailing Address:

P.O.BOX 510299
201 EAST OCEAN DRIVE
KEY COLONY BCH, FL 33051-0299 US

FEI Number: 59-1642192

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

ROGEL, DAVID H, ESQ
2525 PONCE DE LEON BLVD
SUITE 825
CORAL GABLES, FL 33134 US

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: KENNETH LOWRY

02/06/2024

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title PRESIDENT
Name TATARCHUK, BARBARA
Address 201 EAST OCEAN DRIVE
 P.O. BOX 510299 UNIT 1-105
City-State-Zip: KEY COLONY BCH FL 33051-0299

Title VP
Name FELTES, ELSA
Address 201 EAST OCEAN DRIVE
 P.O. BOX 510299 UNIT 1-102
City-State-Zip: KEY COLONY BCH FL 33051-0299

Title TREASURER
Name BRESNICK, BARRY
Address 201 EAST OCEAN DRIVE
 P.O. BOX 510299 UNIT 2-201
City-State-Zip: KEY COLONY BCH FL 33051-0299

Title SECRETARY
Name BALDERSTON, JOHN
Address 201 EAST OCEAN DRIVE
 P.O. BOX 510299 UNIT 3-303
City-State-Zip: KEY COLONY BCH FL 33051-0299

Title ASST. TREASURER
Name BLANCO, FRANCISCO
Address 201 EAST OCEAN DRIVE
 P.O. BOX 510299 UNIT 3-203
City-State-Zip: KEY COLONY BCH FL 33051-0299

Title ASST. SECRETARY
Name FERNANDEZ, MANUEL
Address 201 EAST OCEAN DRIVE
 P.O. BOX 510299 UNIT 3-103
City-State-Zip: KEY COLONY BCH FL 33051-0299

Title OMBUDSMAN
Name BRADFORD, KATHLEEN
Address 201 EAST OCEAN DRIVE
 P.O. BOX 510299 UNIT 3-107
City-State-Zip: KEY COLONY BCH FL 33051-0299

I hereby 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 all other like empowered.

SIGNATURE: BARBARA TATARCHUK

PRESIDENT

02/06/2024

Electronic Signature of Signing Officer/Director Detail

Date