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FILED

Feb 19 1997 8:00am  
Secretary of StateNONPROFIT  
CORPORATION  
ANNUAL REPORT  
1997FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # 736168 (6)

1. Corporation Name

LA CASA DE LAKE WALES ASSOCIATION, INC.

Principal Place of Business

Mailing Address

2180 WEST SR 434  
5000  
LONGWOOD FL 32779  
US2180 WEST SR 434  
5000  
LONGWOOD FL 32779-5044  
US3. Date Incorporated or Qualified  
06/21/19763a. Date of Last Report  
05/01/1996

2. Principal Place of Business

21 10 La Casa

2a. Mailing Address

26 10 La Casa

Suite, Apt. #, etc.

Suite, Apt. #, etc.

4. FEI Number

59-1844680

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional

Fee Required

6. Election Campaign Financing  
Trust Fund Contribution☐\$5.00 May Be  
Added to Fees8. This corporation has liability for intangible tax under s. 199.032,  
Florida Statutes☐ Yes ☒ No

23 Lake Wales, Fl.

28 Lake Wales, Fl.

24 33853

Country

25 USA

29 33853

Country

30 USA

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

HART, JAMES W JR.  
SENTRY MANAGEMENT INC.  
2180 WEST SR 434, SUITE 5000  
LONGWOOD FL 32779

81 Name

John Kenny

82 Street Address (P.O. Box Number is Not Acceptable)

83

222 La Casa

84 City

Lake Wales, FL

85 Zip Code

33853

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE

Signature typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

John Kenny, President

2-10-97

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE PD  
NAME KENNY, JOHN  
STREET ADDRESS 222 LA CASA  
CITY-ST-ZIP LAKE WALES FL☐ DELETE1.1 TITLE  
1.2 NAME  
1.3 STREET ADDRESS  
1.4 CITY-ST-ZIP☐ Change ☐ AdditionTITLE VD  
NAME JARRETT, EUGENE  
STREET ADDRESS 10 LA CASA  
CITY-ST-ZIP LAKE WALES FL☒ DELETE2.1 TITLE  
2.2 NAME  
2.3 STREET ADDRESS  
2.4 CITY-ST-ZIP☐ Change ☒ AdditionTITLE SD  
NAME GROOVER, FRED  
STREET ADDRESS 132 LA CASA  
CITY-ST-ZIP LAKE WALES FL☒ DELETE3.1 TITLE  
3.2 NAME  
3.3 STREET ADDRESS  
3.4 CITY-ST-ZIP☐ Change ☒ AdditionTITLE TD  
NAME MARBUTT, HOYT  
STREET ADDRESS 1117 YARNELL AVE  
CITY-ST-ZIP LAKE WALES FL☐ DELETE4.1 TITLE  
4.2 NAME  
4.3 STREET ADDRESS  
4.4 CITY-ST-ZIP☐ Change ☐ AdditionTITLE D  
NAME SWARTZFAGER, JOHN  
STREET ADDRESS 206 LA CASA  
CITY-ST-ZIP LAKE WALES FL☒ DELETE5.1 TITLE  
5.2 NAME  
5.3 STREET ADDRESS  
5.4 CITY-ST-ZIP☐ Change ☒ AdditionTITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP☐ DELETE6.1 TITLE  
6.2 NAME  
6.3 STREET ADDRESS  
6.4 CITY-ST-ZIP☐ Change ☐ Addition

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 of the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone # 0012284

John Kenny, President 2/10/97 (941)676-0195

CP22E037 (9/96)