FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State

DIVISION OF CORPORATIONS

FILED Mar 09, 1999 8:00 am § Secretary of State

03-09-1999 90116 010 ****61.25

DOC	JMENT#	7361	68

DOCUMENT # /3616	38
LA CASA DE LAKE WALES ASS	OCIATION, INC.
Principal Place of Business	Mailing Address
10 LA CASA LAKE WALES FL 33853 US	10 LA CASA LAKE WALES FL 33853 US
2. Principal Place of Business	2a. Mailing Address
21	26
Suite, Apt. #, etc.	Suite, Apt. #, etc.
22	27
City & State	City & State
23	28
Zip Country	Zip Country

|--|

Applied For

Fee Required

Not Applicable \$8.75 Additional

3. Date Incorporated or Qualifed

5. Certifcate of Status Desired

06/21/1976 4. FEI Number

59-1844680

23								—	
	Zip	Country		Country		6. Election Campaign Financing		\$5.00	
24		25	29 30			Trust Fund Contribution		Added to	rees
9. Name and Address of Current Registered Agent						10. Name and Address of New R	egistered Ag	ent	
				81	Name	Roger Hollowell			
	KENNY, JO	OHN		82	Street A	AND SEE OF SERVICE NOT Acceptal	ble)		
	222 LA CA					<u> </u>			
	LAKE WAL	ES FL 33853		83		10 (6 .			1
Ì				84	City	10 La Casa		85 Zip C	ode
						Cake Wales	FL_	338	
11	Pursuant t	to the provisions of Sections 617.0502 a	ind 617.1508, Florida Statutes, t	the above	-named comor	orporation submits this statement for the pation's board of directors. I hereby accept	purpose of ch t the appoint	anging its nent as reg	egistered istered
	agent. I ar	a familiar with, and accept the obligation	of Section 617.0503, Florida	Statutes.	00. po.	ration's board of directors. I hereby accept	_ /_	11/6	S (2)
SI	GNATURE	KARYA SOU	su jell				2/2	419	4
		Signature, type or printed name of registered agent or	* * * * * * * * * * * * * * * * * * *		signature req	juired when reinstating)	DATE!	DIDECTO	20 IN 12
12	2.	OFFICERS AND		13.		ADDITIONS/CHANGES TO OFF		Change	Addition
TIT	LE	PD	☐ DELETE	1.1 TITLE	1	President	¥	41 cuande	MA AGOIDON
NA	ME	JENKINS, GEORGE H		1.2 NAME		Roger Hollowell			
STI	REET ADDRESS	133 LA CASA		1.3 STREET	, 00.4-00	104 Li. Casa			
CIT	Y-ST-ZIP	LAKE WALES FL 33853		1.4 CITY-ST	-24			Change	∫X Addition
TIT	LE	VD	☐ DELETE	2.1 TITLE		Lake Hales, FL 33853	L	Change	Myddition
NA	ME	GROOVER, FRED		2.2 NAME		V Pres			
STI	REET ADDRESS	132 LA CASA		2.3 STREET	ADDRESS	Dan Batillia			
CIT	Y-ST-ZIP	LAKE WALES FL 33853		2. 4 CITY-S	T-ZIP	129 La Casa, Lake Wale	es. Tt.	33853	Addition
TIT	le	VD	☐ DELETE	3.1 TITLE		V Pres	, (A Change	₹ ∑ Mudition
NA	ME	RAMSEA, DON		3.2 NAME		· · ·			
STI	REET ADDRESS	113 LA CASA		3.3 STREET	ADDRESS	Bill Tierney			
CIT	Y-ST-ZIP	LAKE WALES FL 33853		3.4. CITY-S	T-ZIP	122 La Casa, Lake Wal	es. Fl	33853	□ Addition
TIT	LE	TD	☐ DELETE	4.1 TITLE		Secretary	í	Change	Addition A
NA	ME	WHARFF, MARCIA		4. 2 NAME		Barry Werner			
ST	REET ADDRESS	233 LA CASA		4.3 STREET	ADDRESS	117 Lc. Casa			
CIT	ry-ST-ZIP	LAKE WALES FL 33853		4.4 CITY-ST	r-ZIP	Lake Wales, TL 33853	 ;		STI A JUNIO
TIT	LE	SD	☐ DELETE	5.1 TITLE		Treasurer	1	T Change	Addition
NA	ME	ANDERSON, FAYE	ļ	5.2 NAME		Elaine Siler			
ST	REET ADDRESS	223 LA CASA		5.3 STREET	AUDRESS	208 La Casa			
CIT	ry-st-zip	LAKE WALES FL 33853		5.4 CITY-ST	1-417	Lakê Wales, FL 33853		7.0	- A 1 200
TIT	īLE .		☐ DELETE	6.1 TITLE		Lune wates, 12 13013	ſ	Change	☐ Addition
NA	ME .			6.2 NAME					
ST	REET ADDRESS			6.3 STREET	ADDRESS				

6.4 CITY-ST-ZIP CITY-ST-ZIP 14. I 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 or 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 attaching it with an address with all other like empowered.

QUIRED **SIGNATURE**