

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
May 04, 2004 8:00 am
Secretary of State

05-04-2004 90230 001 *4,226.25

DOCUMENT # 746643

1. Entity Name
CAPRI F ASSOCIATION, INC.



Principal Place of Business
PRIME MANAGEMENT GROUP, INC.
6300 PARK OF COMMERCE BLVD
BOCA RATON, FL 33487 US

Mailing Address
PRIME MANAGEMENT GROUP, INC.
6300 PARK OF COMMERCE BLVD
BOCA RATON, FL 33487 US



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

03232004 Chg-NP CR2E037 (10/03)

4. FEI Number
59-1972477

Applied For
Not Applicable

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

6. Name and Address of Current Registered Agent

SWATT, MYRON
6300 PK OF COMMERCE BLVD
BOCA RATON, FL 33487

7. Name and Address of New Registered Agent

Name

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

City

FL

Zip Code

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

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

(NOTE: Registered Agent signature required when reinstating)

DATE

Filing Fee is \$61.25
Due by May 1, 2004

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

Make check payable to
Florida Department of State

10. OFFICERS AND DIRECTORS

TITLE D ☐ Delete
NAME BARASH, GLORIA
STREET ADDRESS 257 CAPRI F
CITY-ST-ZIP DELRAY BEACH, FL

TITLE D ☐ Delete
NAME GORDON, HENRIEHA
STREET ADDRESS 280 CAPRI F
CITY-ST-ZIP DELRAY BEACH, FL 33484

TITLE PD ☐ Delete
NAME BIAL, NORMAN
STREET ADDRESS 247 CAPRI F
CITY-ST-ZIP DELRAY BEACH, FL

TITLE T ☐ Delete
NAME KWHL, SHIRLEY
STREET ADDRESS 281 CAPRI F
CITY-ST-ZIP DELRAY BEACH, FL

TITLE D ☒ Delete
NAME BIAL, GERTRUD E
STREET ADDRESS 274 CAPRI F
CITY-ST-ZIP DELRAY BEACH, FL

TITLE SD ☐ Delete
NAME POCH, IRIS
STREET ADDRESS 284 CAPRI F
CITY-ST-ZIP DELRAY BCH., FL

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE D ☒ Change ☐ Addition
NAME Gordon, Henrietta
STREET ADDRESS 280 Capri F
CITY-ST-ZIP Delray Beach, FL 33484

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE T ☒ Change ☐ Addition
NAME Kuhl, Shirley
STREET ADDRESS 281 Capri F
CITY-ST-ZIP Delray Beach, FL 33484

TITLE VP ☐ Change ☒ Addition
NAME Poch, Jordan
STREET ADDRESS 284 Capri F
CITY-ST-ZIP Delray Beach, FL 33484

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

12. 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 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

Quis Proh, Secretary

4/26/04

499-8508