

# **2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N05000002645

**FILED**  
**Mar 20, 2012**  
**Secretary of State**

**Entity Name:** CAPE SOUND ON AMELIA ISLAND CONDOMINIUM ASSOCIATION, INC.

**Current Principal Place of Business:**

1950 CAPE SOUND DRIVE  
FERNANDINA BEACH, FL 32034

**New Principal Place of Business:**

**Current Mailing Address:**

P. O. BOX 6086  
FERNANDINA BEACH, FL 32035

**New Mailing Address:**

**FEI Number:** 20-5796119

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

DARLINGTON, RUTH W  
95002 SEA HAWK PLACE  
FERNANDINA BEACH, FL 32034 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

**OFFICERS AND DIRECTORS:**

Title: PD  
Name: HUGHES, JANET  
Address: 1237 HARRISON POINT TRAIL  
City-St-Zip: AMELIA ISLAND, FL 32034

Title: TD  
Name: ARSENEAULT, PIERRE  
Address: 2185 WHITE SANDS WAY  
City-St-Zip: FERNANDINA BEACH, FL 32034

Title: VD  
Name: RASMUSSEN, RON  
Address: 508 MARTIN LAKES DRIVE  
City-St-Zip: JACKSONVILL, FL 32220

Title: D  
Name: MITROUSIS, DENISE  
Address: 1516 HAWKSTONE DRIVE  
City-St-Zip: WAXHAW, NC 28173

Title: SD  
Name: HARPER, KAREN  
Address: 30461 FOREST PARKE DRIVE  
City-St-Zip: FERNANDINA BEACH, FL 32034

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: JANET HUGHES

PD

03/20/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date