


**2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

**FILED**  
**Jan 24, 2008 8:00 am**  
**Secretary of State**

01-24-2008 90047 006 \*\*\*\*61.25

<b>DOCUMENT # N10267</b>			
1. Entity Name CAPTIVA PROPERTY OWNERS ASSOCIATION, INC.			
Principal Place of Business 7529 MARTINIQUE BLVD BOCA RATON, FL 33433		Mailing Address C/O FEDERAL HOME AND PROPERTY MGNT P O BOX 811180 BOCA RATON, FL 33497-0637	
2. Principal Place of Business - No P.O. Box #		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country
01142008		Chg-NP	CR2E037 (12/06)
4. FEI Number 59-2044539		Applied For <input type="checkbox"/> Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required	
<b>6. Name and Address of Current Registered Agent</b>		<b>7. Name and Address of New Registered Agent</b>	
DICKER, KRIVOK & STOLOFF, P.A. 1818 AUSTRALIAN AVENUE SOUTH SUITE 400 WEST PALM BEACH, FL 33409		Name: <u>SACHS + SAX ATTYS AT LAW To Lou Caplan</u> Street Address (P.O. Box Number is Not Acceptable): <u>301 YAMATO (LAW)</u> <u>S.E. 4150</u> City: <u>BOCA RATON, FL.</u> FL Zip Code: <u>33431</u>	
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: <u>Lou Caplan</u>		DATE: <u>1/21/08</u>	
Filing Fee is \$61.25 Due by May 1, 2008		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>	\$5.00 May Be Added to Fees
		Make check payable to Florida Department of State	
<b>10. OFFICERS AND DIRECTORS</b>		<b>11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10</b>	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD ANDRON, SUE 7529 MARTINIQUE BLVD. BOCA RATON, FL 33433 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPD SCELZA, DEBORAH 7380 ANDORRA PLACE BOCA RATON, FL 33433 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD/T DEISER, MARTIN 7465 ANDORRA PLACE BOCA RATON, FL 33433 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<u>MARK LESGER - DIRECTOR</u> <u>7590 MARTINIQUE BLVD</u> <u>BOCA RATON, FL. 33433</u> <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<u>DIRECTOR</u> <u>MARK LESGER</u> <u>7590 MARTINIQUE BLVD</u> <u>BOCA RATON, FL. 33433</u> <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<u>ELA JAFFE - DIRECTOR</u> <u>7574 MARTINIQUE BLVD.</u> <u>BOCA RATON, FL. 33433</u> <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<u>ELA JAFFE - DIRECTOR</u> <u>7574 MARTINIQUE BLVD</u> <u>BOCA RATON, FL. 33433</u> <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<u>DOUG COHEN - DIRECTOR</u> <u>7425 ANDORRA PLACE</u> <u>BOCA RATON, FL. 33433</u> <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<u>DIRECTOR</u> <u>DOUG COHEN</u> <u>7425 ANDORRA PLACE</u> <u>BOCA RATON, FL. 33433</u> <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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: <u>MARK DEISEN VP. Captiva Prop</u>		Date: <u>1/14/08</u> Daytime Phone #: <u>(561) 251-5447</u>	