

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Feb 23, 2005 8:00 am
Secretary of State

02-23-2005 90085 015 ****61.25

DOCUMENT # N23653 1. Entity Name CORINTHIAN CONDOMINIUM ASSOCIATION OF CAPE CORAL, INC.					
Principal Place of Business 923-929 SW 8TH PL # 204 CAPE CORAL FL 33991		Mailing Address 923-929 SW 8TH PL # 204 CAPE CORAL FL 33991 US			
2. Principal Place of Business Suite, Apt. #, etc.		3. Mailing Address Suite, Apt. #, etc.			
City & State		City & State			
Zip	Country	Zip	Country		
4. FEI Number 65-0103437				Applied For ☐ Not Applicable	
5. Certificate of Status Desired ☐				\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent PORTNOY, MICHAEL 929 S W 8TH PLACE # 202 CAPE CORAL FL 33991			7. Name and Address of New Registered Agent Name HAROLD RUSSELL Street Address (P.O. Box Number is Not Acceptable) 929 S.W. 8TH PLACE #204 City CAPE CORAL FL Zip Code 33991		
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><i>Harold Russell</i></u> DATE 2-14-05 Signature, word or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)					
FILE NOW: FEE IS \$61.25 Due By May 1, 2005		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			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PDT PORTNEY, MICHAEL 929 SW 8TH PL APT.202 CAPE CORAL FL 33991 ☒ Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	PRESIDENT HAROLD RUSSELL 929 S.W. 8TH PLACE #204 CAPE CORAL, FL. 33991 ☒ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPDT PONDE, BERNADINE 923 SW 8TH PL CAPE CORAL FL 33991 ☒ Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPDT BROWN, BERNADINE 923 SW 8TH PL #104 CAPE CORAL, FL. 33991 ☒ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	STD SGROI, RICHARD 929 SW 8TH PL #201 CAPE CORAL FL 33991 ☒ Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	STD PORTNEY, MICHAEL 929 SW 8TH PLACE #202 CAPE CORAL, FL. 33991 ☒ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition	
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: <u><i>Harold Russell</i></u> SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR			Date 2-14-05 Daytime Phone # 239-574-6427		