

FILE NOW: FILING FEE IS \$61.25

NONPROFIT  
CORPORATION  
ANNUAL REPORT  
1996



FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # 742379

(1)

1. Corporation Name

CAPRI I ASSOCIATION, INC.



Principal Place of Business

Mailing Address

PRIME MANAGEMENT GROUP, INC.  
1051 SOUTH ROGERS CIRCLE  
BOCA RATON FL 33487

PRIME MANAGEMENT GROUP, INC.  
1051 SOUTH ROGERS CIRCLE  
BOCA RATON FL 33487

3. Date Incorporated or Qualified  
04/13/1978

3a. Date of Last Report  
05/01/1995

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip Country

28 Zip Country

4. FEI Number  
59-1838844

Applied For  
Not Applicable

5. Certificate of Status Desired

☐ \$8.75 Additional  
Fee Required

6. Election Campaign Financing  
Trust Fund Contribution

☐ \$5.00 May Be  
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,  
Florida Statutes ☐ Yes ☒ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

RAIBLE, RON  
1051 S. ROGERS CIR.  
BOCA RATON FL 33487

81 Name

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

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE

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

(NOTE: Registered Agent signature required when reappointing)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE P  
NAME ADAMEK, SADIE  
STREET ADDRESS KINGS PT. CAPRI I 430  
CITY-ST-ZIP DELRAY BEACH FL ☒ DELETE

11 TITLE P  
12 NAME MESHULAM, FLORENCE  
13 STREET ADDRESS 399 CAPRI I  
14 CITY-ST-ZIP DELRAY BEACH FL ☐ Change ☒ Addition

TITLE V  
NAME SCHWARTZ, FRED  
STREET ADDRESS CAPRI I 407  
CITY-ST-ZIP DELRAY BEACH FL ☒ DELETE

21 TITLE P  
22 NAME WALBRUN, EVELYN  
23 STREET ADDRESS 419 CAPRI I  
24 CITY-ST-ZIP DELRAY BEACH FL ☐ Change ☒ Addition

TITLE S  
NAME LASKER, MILDRED  
STREET ADDRESS KINGS PT. CAPRI I 432  
CITY-ST-ZIP DELRAY BEACH FL ☐ DELETE

31 TITLE AGENT  
32 NAME RAIBLE, RONALD  
33 STREET ADDRESS 6300 PARK OF COMMERCE BLVD  
34 CITY-ST-ZIP BOCA RATON, FL 33487 ☐ Change ☒ Addition

TITLE T  
NAME CHARKINS, BERTHA  
STREET ADDRESS CAPRI I 405  
CITY-ST-ZIP DELRAY BEACH FL ☐ DELETE

41 TITLE  
42 NAME  
43 STREET ADDRESS  
44 CITY-ST-ZIP 600001808196

TITLE D  
NAME KROLL, BETTY  
STREET ADDRESS CAPRI 396  
CITY-ST-ZIP DELRAY BEACH FL ☐ DELETE

51 TITLE  
52 NAME  
53 STREET ADDRESS  
54 CITY-ST-ZIP -05/06/96--01016--008 \*\*\*857.50 ☐ Change ☐ Addition

TITLE D  
NAME SHAPSON, LOUIS  
STREET ADDRESS KINGS PT. CAPRI I 392  
CITY-ST-ZIP DELRAY BEACH FL ☒ DELETE

61 TITLE D  
62 NAME GREENBLATT, SAM  
63 STREET ADDRESS 426 CAPRI I  
64 CITY-ST-ZIP DELRAY BEACH FL ☐ Change ☒ Addition

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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 attachment with an address.

SIGNATURE:

Florence Meshulam  
FLORENCE MESHULAM  
REGISTERED AGENT SIGNING OFFICER OR DIRECTOR

3/28/96 997-4045  
Date Daytime Phone

CR2E037 (12/95)