2006 NOT-FOR-PROFIT CORPORATION **ANNUAL REPORT (AR)**

Feb 27, 2006 8:00 am Secretary of State **DOCUMENT # 751352** 1. Entity Name 02-27-2006 90079 022 ****61.25 CAPISTRANO CONDOMINIUM ASSOCIATION, INC. Principal Place of Business Mailing Address 40012000 200 MAITLAND AVENUE ALTAMONTE SPRINGS FL 32701 200 MAITLAND AVENUE ALTAMONTE SPRINGS FL 32701 2. Principal Place of Business 3. Mailing Address **被**第二次 Suite, Apt. #, etc. Suite, Apt. #, etc. 1st MOORE CR2E037 (10/05) City & State City & State Applied For 4. FEI Number 59-2045142 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent HARA MANAGEMENT, INC. Street Address (P.O. Box Number is Not Acceptable) 118 NORTH WYMORE ROAD WINTER PARK FL FL Zip Code FI 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) FILE NOW: FEE IS \$61.25 9. Election Campaign Financing Make Check Payable to \$5.00 May Be Due By May 1, 2006 Trust Fund Contribution. Added to Fees Florida Department of State 10. OFFICERS AND DIRECTORS 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 TITLE PD Delete TITLE **Change** ■ Addition NAME MACTOLFF, TRACEY NAME 200 MAITLAND AVE. #176 STREET ADDRESS STREET ADDRESS **ALTAMONTE SPRINGS FL 32701** CITY-ST-ZIP CITY-ST-ZIP 3270/ TD Delete Change TITLE TITLE Addition LEVITI, PATTI NAME NAME 200 MAITLAND AVE, #219 STREET ADDRESS STREET ADDRESS **ALTAMONTE SPRINGS FL 32701** CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITE F NAME PEDALINO, JOHN NAME STREET ADDRESS 200 MAITLAND AVE. #225 STREET ADDRESS CITY-ST-ZIF ALTAMONTE SPRINGS FL 32701 CITY-ST-ZIP TITLE TITE F Chance Delete RAMPONE, VINCENT NAME STREET ADDRESS 200 MAITLAND AVE #193 STREET ADDRESS CITY-ST-ZIP ALTAMONTE SPRINGS FL 32701 CITY-ST-ZIP TITLE Delete TITLE ☐ Change ☐ Addition KLINCO, CAROL NAME NAME 200 MAITLAND AVENUE #143 STREET ADDRESS STREET ADDRESS ALTAMONTE SPRINGS FL 32701 CITY-ST-ZIP CITY-ST-ZIP TITLE Delete TITLE ☐ Change ☐ Addition NAME NAME

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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 of trustee empowered to execute this report as required by Chanter 817, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment withyan address, with all offer like empowered.

STREET ADDRESS

CITY-ST-ZIP

STREET ADDRESS

CITY-ST-7IP

FILED