2016 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 742040

Entity Name: CAPRI L ASSOCIATION, INC.

Current Principal Place of Business:

Olo Will Cont. AND COADING & MANAGEMENT CO

C/O WILSON LANDSCAPING & MANAGEMENT CORP. 1300 NW 17TH AVE. SUITE 270 DELRAY BEACH, FL 33445

Current Mailing Address:

C/O WILSON LANDSCAPING & MANAGEMENT CORP. 1300 NW 17TH AVE. SUITE 270 DELRAY BEACH, FL 33445 US

FEI Number: 59-1837527 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

WILSON, DANNY L C/O WILSON LANDSCAPING & MANAGEMENT CORP. 1300 NW 17TH AVE. SUITE 270 DELRAY BEACH, FL 33445 US

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

FILED Feb 08, 2016

Secretary of State

CC4481451616

Officer/Director Detail:

Title P Title S

Name ROSENTHAL, SANDRA Name MLAWSKI, HANA

Address C/O WILSON LANDSCAPING & Address C/O WILSON LANDSCAPING &

MANAGEMENT CORP. MANAGEMENT CORP.

1300 NW 17TH AVE. SUITE 270 1300 NW 17TH AVE. SUITE 270

City-State-Zip: DELRAY BEACH FL 33445 City-State-Zip: DELRAY BEACH FL 33445

Title T Title DIRECTOR

Name LENNER, LAWRENCE Name DELIN, HOWARD

Address C/O WILSON LANDSCAPING & Address C/O WILSON LANDSCAPING &

MANAGEMENT CORP. MANAGEMENT CORP.

1300 NW 17TH AVE. SUITE 270 1300 NW 17TH AVE. SUITE 270

City-State-Zip: DELRAY BEACH FL 33445 City-State-Zip: DELRAY BEACH FL 33445

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.