2022 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 742378

Entity Name: CAPRI H ASSOCIATION, INC.

Entity Name: CAPRITI ASSOCIATION, INC

Current Principal Place of Business:

SEACREST SERVICES INC 2101 CENTREPARK WEST DRIVE SUITE 110

WEST PALM BEACH, FL 33484

Current Mailing Address:

SEACREST SERVICES INC 2101 CENTREPARK WEST DRIVE SUITE 110 WEST PALM BEACH, FL 33484 US

FEI Number: 59-1848830 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

KAYE BENDER REMBAUM 1200 PARK CENTRAL BLVD S POMPANO BEACH, FL 33064 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: MICHAEL BENDER 03/07/2022

Electronic Signature of Registered Agent

Officer/Director Detail:

Title PRESIDENT Title VP

Name MACIAS, RICARDO Name BROWNE-CROSBY, VERONICA

Address SEACREST SERVICES INC Address SEACREST SERVICES INC

2101 CENTREPARK WEST DRIVE 110 2101 CENTREPARK WEST DRIVE 110

City-State-Zip: WEST PALM BEACH FL 33409 City-State-Zip: WEST PALM BEACH FL 33409

 Title
 TREASURER
 Title
 SECRETARY

 Name
 LEVINE, JOAN
 Name
 MOSS, LINDA

Address SEACREST SERVICES INC Address SEACREST SERVICES INC

2101 CENTREPARK WEST DRIVE 110 2101 CENTREPARK WEST DRIVE 110

City-State-Zip: WEST PALM BEACH FL 33409 City-State-Zip: WEST PALM BEACH FL 33409

Title DIRECTOR Title DIRECTOR

Name HEMSATH, DEBBIE Name ROSENSHEIN, GAIL

Address SEACREST SERVICES INC Address SEACREST SERVICES INC

2101 CENTREPARK WEST DRIVE 110 2101 CENTREPARK WEST DRIVE 110

City-State-Zip: WEST PALM BEACH FL 33409 City-State-Zip: WEST PALM BEACH FL 33409

Title DIRECTOR

Name FENIMORE, VALERIE

Address SEACREST SERVICES INC

2101 CENTREPARK WEST DRIVE 110

City-State-Zip: WEST PALM BEACH FL 33409

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.

SIGNATURE: RICARDO MACIAS PRESIDENT 03/07/2022

Electronic Signature of Signing Officer/Director Detail

Date

FILED Mar 07, 2022

Secretary of State

8426851587CC

Date