

**2016 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 742380

**Entity Name:** CAPRI J ASSOCIATION, INC.

**Current Principal Place of Business:**

C/O A&N MANAGEMENT  
902 CLINT MOORE RD #110  
BOCA RATON, FL 33487

**Current Mailing Address:**

C/O A&N MANAGEMENT  
902 CLINT MOORE RD #110  
BOCA RATON, FL 33487 US

**FEI Number:** 59-1858770

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

A&N MANAGEMENT  
C/O A&N MANAGEMENT  
902 CLINT MOORE RD #110  
BOCA RATON, FL 33487 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:** NORMAN SILVERSTEIN

04/18/2016

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title T  
Name SMITH, PHYLLIS  
Address 433 CAPRI J  
City-State-Zip: DELRAY BEACH FL 33484

Title DIRECTOR  
Name CATALA, VICTOR  
Address 465 CAPRI J  
City-State-Zip: DELRAY BEACH FL 33484

Title SECRETARY  
Name FRANKENSTEIN, ELAINE  
Address 457 CAPRI J  
City-State-Zip: DELRAY BEACH FL 33484

Title VP  
Name DOMENECH, JULIAN  
Address 459 CAPRI J  
City-State-Zip: DELRAY BEACH FL 33484

Title PRESIDENT  
Name VACCARINO, CARL  
Address 460 CAPRI J  
City-State-Zip: DELRAY BEACH FL 33484

*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:** CARL VACCARINO

PRES

04/18/2016

Electronic Signature of Signing Officer/Director Detail

Date