

2018 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 742381

Entity Name: CAPRI K ASSOCIATION, INC.**Current Principal Place of Business:**FIRST SERVICE RESIDENTIAL
6300 PARK OF COMMERCE BLVD.
BOCA RATON, FL 33487-8290**Current Mailing Address:**FIRST SERVICE RESIDENTIAL
6300 PARK OF COMMERCE BLVD.
BOCA RATON, FL 33487-8290 US**FEI Number:** 59-1856178**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**SKRLD, INC.
1655 PALM BEACH LAKES BLVD.
C-500
W. PALM BEACH, FL 33401 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:** LAURA M MANNING-HUDSON

01/16/2018

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title	PRES
Name	MORROW, FRAN
Address	503 CAPRI K
City-State-Zip:	DELRAY BEACH FL 33484

Title	VP
Name	LIVSKY, DONALD
Address	496 CAPRI K
City-State-Zip:	DELRAY BEACH FL 33484

Title	DIRECTOR
Name	GOULD, LINDA
Address	490 CAPRI K
City-State-Zip:	DELRAY BEACH FL 33484

Title	SECRETARY
Name	BELLO, JEANETTE
Address	519 CAPRI K
City-State-Zip:	DELRAY BEACH FL 33484

Title	TREASURER
Name	CLARK, EDITH
Address	486 CAPRI K
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: FRAN MORROW

PRESIDENT

01/16/2018

Electronic Signature of Signing Officer/Director Detail

Date