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: DENNIS INGHRAM

Electronic Signature of Signing Officer/Director Detail

#### **DOCUMENT# 743479**

## Entity Name: CAPE CORAL VILLAS CONDOMINIUM ASSOCIATION, INC.

### **Current Principal Place of Business:**

C/0 AMERICAN CONDO MANAGEMENT PO BOX 100399 CAPE CORAL, FL 33910

### **Current Mailing Address:**

C/O AMERICAN CONDO MANAGEMENT 4223 DEL PRADO BLVD S CAPE CORAL, FL 33904 US

## FEI Number: 65-0418760

# Name and Address of Current Registered Agent:

KASE, SUSAN C/O AMERICAN CONDO MANAGEMENT 4223 DEL PRADO BLVD S CAPE CORAL, FL 33904 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	SUSAN KASE			02/13/2016	
	Electronic Signature of Registered Agent			Date	
Officer/Director Detail :					
Title	Р	Title	VP		
Name	INGHRAM, DENNIS	Name	BESKE, DONNA		
Address	4223 DEL PRADO BLVD S	Address	4223 DEL PRADO BLVD S		
City-State-Zip:	CAPE CORAL FL 33904	City-State-Zip:	CAPE CORAL FL 33904		
Title	S/T				
Name	SACCO, JOSEPH P				
Address	4223 DEL PRADO BLVD S				
City-State-Zip:	CAPE CORAL FL 33904				

PRESIDENT

02/13/2016 Date

FILED Feb 13, 2016 Secretary of State CC9077588269

Certificate of Status Desired: No