

2014 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 746642

Entity Name: CAPRI B ASSOCIATION, INC.**Current Principal Place of Business:**THE CONTINENTAL GROUP
6300 PK OF COMMERCE BLVD
BOCA RATON, FL 33487**Current Mailing Address:**THE CONTINENTAL GROUP
6300 PK OF COMMERCE BLVD
BOCA RATON, FL 33487 US**FEI Number:** 59-1965624**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**SKRLD, INC.
201 ALHAMBRA CIRCLE 11TH FLOOR
CORAL GABLES, FL 33134 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

04/08/2014

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title VP
Name GRUBER, HOWARD
Address 54 CAPRI B
City-State-Zip: DELRAY BEACH FL 33484

Title D
Name SULTAN, EUGENE
Address 85 CAPRI B
City-State-Zip: DELRAY BEACH FL 33484

Title DIRECTOR
Name HECKER, SHIRLEE
Address 65 CAPRI B
City-State-Zip: DELRAY BEACH FL 33484

Title SECRETARY
Name GOLDSTEIN, SANDRA
Address 69 CAPRI B
City-State-Zip: DELRAY BEACH FL 33484

Title TREA
Name ECKER, ELENA
Address 76 CAPRI B
City-State-Zip: DELRAY BEACH FL 33484

Title PRESIDENT
Name KATZ, JUDY
Address 61 CAPRI B
City-State-Zip: DELRAY BEACH FL 33484

Title DIRECTOR
Name MACHERONE, IRENE
Address 95 CAPRI B
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: JUDY KATZ

PRES.

04/08/2014

Electronic Signature of Signing Officer/Director Detail

Date