

**2014 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 746643

**Entity Name:** CAPRI F ASSOCIATION, INC.**Current Principal Place of Business:**THE CONTINENTAL GROUP  
6300 PARK OF COMMERCE BLVD  
BOCA RATON, FL 33487**Current Mailing Address:**THE CONTINENTAL GROUP  
6300 PARK OF COMMERCE BLVD  
BOCA RATON, FL 33487 US**FEI Number:** 59-1972477**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**SKRLD, INC.  
800 VILLAGE SQUARE CROSSING - SUITE 222  
PALM BEACH GARDENS, FL 33410 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	D
Name	ABOWITZ, ELAINE
Address	242 CAPRI F
City-State-Zip:	DELRAY BEACH FL 33484

Title	PRES
Name	POCH, IRIS
Address	284 CAPRI F
City-State-Zip:	DELRAY BEACH FL 33484

Title	VP
Name	HONEY, GORDON
Address	280 CAPRI F
City-State-Zip:	DELRAY BEACH FL 33484

Title	TREASURER
Name	GROBMAN, SIDNEY
Address	281 CAPRI F
City-State-Zip:	DELRAY BCH. FL 33484

Title	SECRETARY
Name	STILMAN, PRIVA
Address	249 CAPRI F
City-State-Zip:	DELRAY BEACH FL 33484

Title	DIRECTOR
Name	GABRIEL, ALLEN
Address	252 CAPRI F
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:** IRIS POCH

PRES

04/08/2014

Electronic Signature of Signing Officer/Director Detail

Date