

**2017 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 746643

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

**Current Principal Place of Business:**

FIRST SERVICE RESIDENTIAL  
6300 PARK OF COMMERCE BLVD  
BOCA RATON, FL 33487

**Current Mailing Address:**

FIRST SERVICE RESIDENTIAL  
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.  
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

01/18/2017

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 HALLEN, EVELYN  
Address 245 CAPRI F  
City-State-Zip: DELRAY BEACH FL 33484

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

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

Title TREASURER  
Name GABRIEL, ALLEN  
Address 252 CAPRI F  
City-State-Zip: DELRAY BEACH FL 33484

Title DIRECTOR  
Name DANIELS, JEAN  
Address 268 CAPRI F  
City-State-Zip: DELRAY BEACH FL 33484

Title DIRECTOR  
Name SCHLOSBERG, JUDY  
Address 251 DELRAY BEACH  
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:** EVELYN HALLEN

PRESIDENT

01/18/2017

Electronic Signature of Signing Officer/Director Detail

Date