2015 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01119

Entity Name: THE CAPE PARKWAY CONDOMINIUM ASSOCIATION, INC.

FILED
Mar 11, 2015
Secretary of State
CC9163175147

Current Principal Place of Business:

C/O AMERICAN CONDO MGMT 4223 DEL PRADO S CAPE CORAL, FL 33904

Current Mailing Address:

C/O AMERICAN CONDO MGMT PO BOX 100399 CAPE CORAL, FL 33910 US

FEI Number: 59-2428802 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

KASE, SUSAN M C/O AMERICAN CONDO MGMT 4223 DEL PRADO 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:

Electronic Signature of Registered Agent Date

Officer/Director Detail:

Title SECRETARY, TREASURER Title VF

Name RUSAK, JANICE Name REILLY, MARK

Address 4223 DEL PRADO BLVD S

City-State-Zip: CAPE CORAL FL 33904

Address 4223 DEL PRADO BLVD S

City-State-Zip: CAPE CORAL FL 33904

Title PRESIDENT Title DIRECTOR

Name SLUSSER, ROBERT Name MORENCY, DAVID

Address 4223 DEL PRADO BLVD S Address C/O AMERICAN CONDO MGMT

4223 DEL PRADO S
City-State-Zip: CAPE CORAL FL 33904

City-State-Zip: CAPE CORAL FE 33904 City-State-Zip: CAPE CORAL FL 33904

Title DIRECTOR
Name MAURO, BART

Address C/O AMERICAN CONDO MGMT

4223 DEL PRADO S

City-State-Zip: CAPE CORAL FL 33904

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: ROBERT SLUSSER

Electronic Signature of Signing Officer/Director Detail

PRESIDENT

03/11/2015