## 2020 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01119

Entity Name: THE CAPE PARKWAY CONDOMINIUM ASSOCIATION, INC.

FILED Feb 13, 2020 Secretary of State 3031757875CC

## **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 Title VP

Name RUSAK, JANICE Name REILLY, MARK

Address C/O AMERICAN CONDO MGMT Address C/O AMERICAN CONDO MGMT

PO BOX 100399 PO BOX 100399

City-State-Zip: CAPE CORAL FL 33910 City-State-Zip: CAPE CORAL FL 33910

Title PRESIDENT Title TREASURER

Name SLUSSER, ROBERT Name SCHIFF, EDWARD

Address C/O AMERICAN CONDO MGMT Address C/O AMERICAN CONDO MGMT

PO BOX 100399 PO BOX 100399

City-State-Zip: CAPE CORAL FL 33910 City-State-Zip: CAPE CORAL FL 33910

Title DIRECTOR

Name NEWCOMER, DAVID

Address C/O AMERICAN CONDO MGMT

PO BOX 100399

City-State-Zip: CAPE CORAL FL 33910

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 PRESIDENT 02/13/2020