

**2024 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N03090

**Entity Name:** CAPE CUTLER HOMEOWNERS ASSOCIATION, INC.

**Current Principal Place of Business:**

7880 SW 181 TERRACE  
PALMETTO BAY, FL 33157

**Current Mailing Address:**

7880 SW 181 TERRACE  
PALMETTO BAY, FL 33157 US

**FEI Number:** 65-0014383

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

SALINAS, WILLIAM  
7880 SW 181 TERRACE  
PALMETTO BAY, FL 33157 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:** WILLIAM SALINAS

01/18/2024

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title           TREASURER  
Name           RODRIGUEZ, GABRIEL  
Address        7840 SW 183 TERRACE  
City-State-Zip: PALMETTO BAY FL 33157

Title           PRESIDENT  
Name           SALINAS, WILLIAM  
Address        7880 SW 181 TERRACE  
City-State-Zip: PALMETTO BAY FL 33157

Title           SECRETARY  
Name           SHAY, MICHELLE  
Address        7761 SW 183 TERR  
City-State-Zip: PALMETTO BAY FL 33157

Title           HOSPITALITY  
Name           INTERRANTE, LAUREN  
Address        7840 SW 180 STREET  
City-State-Zip: PALMETTO BAY FL 33157

Title           VP  
Name           ROOS, LES  
Address        7701 SW 182 TER  
City-State-Zip: PALMETTO BAY FL 33157

*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:** MICHELLE SHAY

**SECRETARY**

01/18/2024

Electronic Signature of Signing Officer/Director Detail

Date