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

DOCUMENT# N06404

Entity Name: CAPISTRANO CONDOMINIUM OWNERS' ASSOCIATION, INC.

**FILED** Apr 17, 2014 **Secretary of State** CC8981483138

# **Current Principal Place of Business:**

180 CULLMAN AVENUE SEAGROVE BEACH, FL 32459

### **Current Mailing Address:**

P.O. BOX 611404

ROSEMARY BEACH, FL 32413

FEI Number: 59-3227980 Certificate of Status Desired: No

## Name and Address of Current Registered Agent:

HEASLETT, SHEILA 9064 E. COUNTY HIGHWAY 30A **UNIT 108** PANAMA CITY BEACH, FL 32413 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:

DSEC Title Title DP

Name HARPER, JODY Name WAGNER. DEAN

Address 305 REDWOOD AVENUE Address 945 CHARTERHOUSE CT WESTERVILLE OH 43081 City-State-Zip: City-State-Zip: DOTHAN AL 36303

Title DV Title DT

Name COCHRAN, STAN Name CAVANAGH, JOAN Address 136 SOUTH CREEK Address 589 ASPEN WOODS DRIVE FRANKFORT KY 40601 City-State-Zip: City-State-Zip: YARDLEY PA 19067

Title Title

ASCENZO, DAN Name Name YORK, KIM 2420 HUGO ST. #2 Address Address 126 WENTWORTH DRIVE City-State-Zip: DOTHAN AL 36305

Title D

Name ASCENZO, DAN Address 2420 HUGO ST. #2 City-State-Zip: DALLAS TX 75204 City-State-Zip: DALLAS TX 75204

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.

04/17/2014 SIGNATURE: DEAN WAGNER **PRESIDENT** 

Electronic Signature of Signing Officer/Director Detail

Date