

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

DOCUMENT# N08000007419

**FILED**  
**Mar 07, 2014**  
**Secretary of State**  
**CC6636600770**

**Entity Name:** THE CAPE BELLE CONDOMINIUM ASSOCIATION, INC.

**Current Principal Place of Business:**

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

**Current Mailing Address:**

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

**FEI Number:** 59-2653433

**Certificate of Status Desired:** No

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

KASE, SUSAN CAM  
AMERICAN CONDO MANAGEMENT  
4223 DEL PRADO BLVD 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:** SUSAN KASE

03/07/2014

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title P  
Name FERNANDEZ, MICHELLE  
Address 4936 VICEROY ST, #6  
City-State-Zip: CAPE CORAL FL 33904

Title VP  
Name MARTIN, RICHARD  
Address 4936 VICEROY ST, #5  
City-State-Zip: CAPE CORAL FL 33904

Title ST  
Name DEWITT, MICHELLE  
Address 4936 VICEROY ST., #2  
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:** MICHELLE FERNANDEZ

**PRESIDENT**

03/07/2014

Electronic Signature of Signing Officer/Director Detail

Date