## 2014 FLORIDA PROFIT CORPORATION ANNUAL REPORT

**DOCUMENT# 396790** 

Entity Name: CAPRI ISLES GOLF, INC.

**Current Principal Place of Business:** 

1454 GLENEAGLES DR. VENICE, FL 34292

**Current Mailing Address:** 

1454 GLENEAGLES DR. VENICE, FL 34292

FEI Number: 59-1380785 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

MCCOY, ROBIN L. 2045 TIMUCUA TRAIL NOKOMIS, FL 34275 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

**FILED** Jan 07, 2014

**Secretary of State** 

CC8322502915

Officer/Director Detail:

Title Title VΡ

MCCOY, ROBIN L. Name ILER, DOUGLAS Name

Address 2045 TIMUCUA TRAIL Address 1808 ABERDEEN ROAD

City-State-Zip: LOUISVILLE KY 40257 NOKOMIS FL 34275 City-State-Zip:

VΡ Title Title **VPS** 

Name RICH, NAN E BOBBETT, RONALD M Name

Address 1464 TURNBERY PL. Address 2209 CALUSA LAKES BLVD. VENICE FL 34292 City-State-Zip:

City-State-Zip: VENICE FL 34275

Title AS

Name MATUSZAK, DAVID W 5313 72ND ST EAST Address City-State-Zip: BRADENTON FL 34203

SIGNATURE: ROBIN L. MCCOY

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 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

Electronic Signature of Signing Officer/Director Detail

PT

01/07/2014 Date