2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT#712228

Entity Name: CAPRI COMMUNITY, INC.

US

FILED May 11, 2006 Secretary of State

Current Principal Place of Business:	New Principal Place of Business:

338 CAPRI BLVD NAPLES, FL 34113

Current Mailing Address: New Mailing Address:

338 CAPRI BLVD

NAPLES, FL 34113 US

FEI Number: 59-6190065 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

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

HALL, ANN B

338 CAPRI BLVD

NAPI ES EL 3/113

NAPI ES EL 3/113

NAPLES, FL 34113 US NAPLES, FL 34113 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: RICHARD TAYLOR 05/11/2006

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

itle: P () Delete Title: P (X) Change () Addition

 Name:
 WALTON, CHUCK
 Name:
 COLVIN, KIRK

 Address:
 124 E. HILO ST
 Address:
 163 SAN SALVADOR

 City-St-Zip:
 NAPLES, FL 34113
 City-St-Zip:
 NAPLES, FL 34113

 Address:
 118 W. HILO ST
 Address:
 166 TAHITI CIR.

 City-St-Zip:
 NAPLES, FL 34113
 City-St-Zip:
 NAPLES, FL 34113

Title: T () Delete Title: S (X) Change () Addition
Name: SKILLERN, CHARLIE Name: BOB, BROWN

 Address:
 159 W PAGO DR
 Address:
 19 EAST PELICAN

 City-St-Zip:
 NAPLES, FL 34113
 City-St-Zip:
 NAPLES, FL 34113

 $\label{eq:time_state} {\sf Title:} \qquad {\sf S} \qquad (\) \, {\sf Delete} \qquad \qquad {\sf Title:} \qquad {\sf V} \qquad ({\sf X}) \, {\sf Change} \, (\) \, {\sf Addition}$

 Name:
 HALL, ANN B
 Name:
 DECKER, TED

 Address:
 103 W. PAGO PAGO ST
 Address:
 425 SAN JUAN AVE.

 City-St-Zip:
 NAPLES, FL 34113
 City-St-Zip:
 NAPLES, FL 34113

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: RICHARD TAYLOR T 05/11/2006