

2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 722294

FILED
Feb 09, 2012
Secretary of State

Entity Name: CAPE SHORES ASSOCIATION, INC.

Current Principal Place of Business:

6701 N. ATLANTIC AVE.
CAPE CANAVERAL, FL 32920 US

New Principal Place of Business:

100 LUNAR DRIVE
CAPE CANAVERAL, FL 32920 US

Current Mailing Address:

1980 N ATLANTIC AVE
STE 701
COCOA BCH., FL 32931

New Mailing Address:

FEI Number: 59-1565761 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

BP DAVIS PROPERTY MANAGEMENT
1980 N ATLANTIC AVE
STE 701
COCOA BEACH, FL 32932 US

Name and Address of New Registered Agent:

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

OFFICERS AND DIRECTORS:

Title: TD
Name: LARSON, PAM
Address: 150 INTREPID WAY #C
City-St-Zip: CAPE CANAVERAL, FL 32920

Title: D
Name: ROCKWELL, ROCKY
Address: 181 CAPE SHORES CIRCLE #F
City-St-Zip: CAPE CANAVERAL, FL 32920

Title: SD
Name: ROWE, REBECCA
Address: 131 TRANQUILITY WAY #I
City-St-Zip: CAPE CANAVERAL, FL 32920

Title: D
Name: GIORDANO, PHILIP
Address: 230 CAPE SHORES CIRCLE #B
City-St-Zip: CAPE CANAVERAL, FL 32920

Title: PD
Name: TOENJES, GARY
Address: 291 CAPE SHORES CIR #H
City-St-Zip: CAPE CANAVERAL, FL 32920

Title: DV
Name: DOHERTY, CAL
Address: 200 CAPE SHORES CIR, # E
City-St-Zip: CAPE CANAVERAL, FL 32920

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: GARY TOENJES

P

02/09/2012

Electronic Signature of Signing Officer or Director

Date