

2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 729894

FILED
Jan 18, 2011
Secretary of State

Entity Name: CAPE FLORIDA CLUB CONDOMINIUM, PHASE III, INC.

Current Principal Place of Business:

242 SEAVIEW DRIVE
KEY BISCAVNE, FL 33149 US

New Principal Place of Business:

Current Mailing Address:

C/O CPM
1801 CORAL WAY, STE. 305
MIAMI, FL 33145

New Mailing Address:

C/O CPM CORP.
1801 CORAL WAY, STE. 305
MIAMI, FL 33145

FEI Number: 59-1674397

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CERTIFIED PROPERTY MANAGEMENT CORPORATION
C/O ALBERTO COHEN
1801 CORAL WAY, STE. 305
MIAMI, FL 33145 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: SD
Name: BACON, BELINDA
Address: 234 SEAVIEW DR
City-St-Zip: KEY BISCAVNE, FL 33149

Title: TD
Name: DURHAM, BILL
Address: 230 SEAVIEW DR
City-St-Zip: KEY BISCAVNE, FL 33149

Title: DVP
Name: ABBO, ROBERT
Address: 238 SEAVIEW DR
City-St-Zip: KEY BISCAVNE, FL 33149

Title: PD
Name: BROWN, STEPHANIE
Address: 232 SEAVIEW DR
City-St-Zip: KEY BISCAVNE, FL 33149

Title: D
Name: BASSI, LUCIA
Address: 222 SEAVIEW DR
City-St-Zip: KEY BISCAVNE, FL 33149

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: ALBERTO COHEN

RA

01/18/2011

Electronic Signature of Signing Officer or Director

Date