## 2007 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

## **DOCUMENT# 745424**

FILED Oct 10, 2007 Secretary of State

Entity Name: THE 12080 CAPRI CIRCLE SOUTH CONDOMINIUM ASSOCIATION, INC.

urrent P	rincipal Place of Business:	New Principal Pl	ace of Business:
2080 CAI INIT 202	PRI CIRCLE S		
	REISLAND, FL 33706		
urrent N	lailing Address:	New Mailing Add	Iress:
NIT 202	PRI CIRCLE S RE ISLAND, FL 33706		
	,	"  Novembau Nat Amerikaalula (	Continue of Status Basinad ( )
	: 59-3010287	El Number Not Applicable ( eive the prior notice.	) Certificate of Status Desired ( )
lame and	Address of Current Registered Agent:	Name and Addre	ss of New Registered Agent:
202	PRICIRS REISLAND, FL 33706 US		
	named antity submits this statement for the purpo	see of changing its regis	torod office or registered agent, or bet
he above	named entity submits this statement for the purpo e of Florida.	ose of changing its regis	tered office or registered agent, or bot
he above the State		ose of changing its regis	tered office or registered agent, or bot
he above the State	e of Florida.	ose of changing its regis	tered office or registered agent, or bot Date
he above the State	e of Florida.		
he above the State	e of Florida.  RE: STEVEN CURETON  Electronic Signature of Registered Agent		Date
he above the State IGNATUI  PFFICER: tte: ame: ddress:	e of Florida.  RE: STEVEN CURETON  Electronic Signature of Registered Agent  S AND DIRECTORS:  SD () Delete HARRISON, MARGARET 12080 CAPRI CIR SO, UNIT 201	ADDITIONS/CHA Title: Name: Address:	Date  NGES TO OFFICERS AND DIRECTO
he above the State IGNATUI	e of Florida.  RE: STEVEN CURETON  Electronic Signature of Registered Agent  S AND DIRECTORS:  SD () Delete  HARRISON, MARGARET 12080 CAPRI CIR SO, UNIT 201  TREASURE ISLAND, FL 33706  TD () Delete  CURETON, STEVEN 12080 CAPRI CIR S, UNIT 202	ADDITIONS/CHA  Title: Name: Address: City-St-Zip:  Title: Name: Address:	Date  NGES TO OFFICERS AND DIRECTO  ( ) Change ( ) Addition

I hereby certify that the information supplied with this filing does not qualify 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: STEVEN CURETON TD 10/10/2007