

2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 746192

FILED
Feb 07, 2012
Secretary of State

Entity Name: CAPRI LAGOONS UNIT V, INC.

Current Principal Place of Business:

8041 BLIND PASS RD
SAINT PETERSBURG, FL 33706

New Principal Place of Business:

Current Mailing Address:

8041 BLIND PASS RD
SAINT PETERSBURG, FL 33706

New Mailing Address:

FEI Number: 59-2060092

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

RESOP, JUDITH A
8041 BLIND PASS ROAD
ST PETE BEACH, FL 33706 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: PRES
Name: INGLEHEART, JEANNE K
Address: 12442 CAPRI CIRCLE NORTH
City-St-Zip: TREASURE ISLAND, FL 33706

Title: VPD
Name: OSBORNE, G. BRIAN
Address: 12462 CAPRI CIRCLE NORTH
City-St-Zip: TREASURE ISLAND, FL 33706

Title: ST
Name: AUKEMAN, NANCY
Address: 12456 CAPRI CIRCLE NORTH
City-St-Zip: TREASURE ISLAND, FL 33706

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: JUDITH A RESOP

PM

02/07/2012

Electronic Signature of Signing Officer or Director

Date