

FILE NOW: FILING FEE AFTER MAY 1 IS \$155.00

CORPORATION,
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
Tallahassee, Florida
32399-0001

DOCUMENT # **746642** (8)

CAPRI B ASSOCIATION, INC.

FILED
FLORIDA DEPARTMENT OF STATE
CORPORATIONS

95 MAY -1 AM 11:45

Principal Place of Business

Mailing Address

C/O PRIME MANAGEMENT GROUP, INC.
1051 SOUTH ROGERS CIRCLE
BOCA RATON FL 33487

C/O PRIME MANAGEMENT GROUP, INC.
1051 SOUTH ROGERS CIRCLE
BOCA RATON FL 33487

DO NOT WRITE IN THIS SPACE

3. Date Incorporated (or Qualified)

04/05/1979

3a. Date of Last Report

03/24/1994

4. FEI Number

59-1965624

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

☐

\$5.00 May Be
Added to Fees

7. Nonprofit with IRS 501(c)(3)
Tax Exempt Status

☐

\$68.75 Supplemental
Fee Not Required

8. This corporation has liability for intangible tax under S. 199.032,
Florida Statutes

☐ Yes

☒ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

RAIBLE, RONALD
1051 SOUTH ROGERS CIRCLE
BOCA RATON FL 33487

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85

Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered office or registered agent or both in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of Section 607.0505, Florida Statutes.

SIGNATURE

Signature of Agent (Registered Agent) (Type Name and Title)

Signature of Registered Agent (Type Name and Title)

Date

12. OFFICERS AND DIRECTORS

13. ADDITIONAL CHANGES TO OFFICERS AND DIRECTORS IN 12:

TITLE	P.
NAME	KRULEWITZ, HARRY
STREET ADDRESS	KINGS PT. CAPRI B 89
CITY, ST, ZIP	DELRAY BEACH FL
TITLE	V.
NAME	KURZ, EGON
STREET ADDRESS	CAPRI B 50
CITY, ST, ZIP	DELRAY BEACH FL
TITLE	S.
NAME	BRAMBLT, CLARA
STREET ADDRESS	KINGS PT. CAPRI B 77
CITY, ST, ZIP	DELRAY BEACH FL
TITLE	T.
NAME	BERG, SYLVIA
STREET ADDRESS	KINGS PT. CAPRI B 86
CITY, ST, ZIP	DELRAY BEACH FL
TITLE	D.
NAME	BLACK, BEA
STREET ADDRESS	KINGS PT. CAPRI B 70
CITY, ST, ZIP	DELRAY BEACH FL
TITLE	
NAME	
STREET ADDRESS	
CITY, ST, ZIP	

11 TITLE	☐ Change ☐ Addition
12 NAME	
13 STREET ADDRESS	
14 CITY, ST, ZIP	
21 TITLE	☐ Change ☐ Addition
22 NAME	
23 STREET ADDRESS	
24 CITY, ST, ZIP	
31 TITLE	☒ Change ☐ Addition
32 NAME	
33 STREET ADDRESS	
34 CITY, ST, ZIP	
41 TITLE	☐ Change ☐ Addition
42 NAME	
43 STREET ADDRESS	
44 CITY, ST, ZIP	
51 TITLE	☐ Change ☐ Addition
52 NAME	
53 STREET ADDRESS	
54 CITY, ST, ZIP	
61 TITLE	☐ Change ☐ Addition
62 NAME	
63 STREET ADDRESS	
64 CITY, ST, ZIP	

Signature of Registered Agent
Harry Krulewitz
3/8/95 4989625

SIGNATURE:

SIGNATURE AND TYPED ON PRINTED NAME OF REGISTERED AGENT OR DIRECTOR

HARRY KRULEWITZ

3/8/95 4989625