

# 2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 749920

FILED  
Mar 21, 2012  
Secretary of State

**Entity Name:** CAPTAIN'S COVE CONDOMINIUM ASSOCIATION OF FORT MYERS, INC.

**Current Principal Place of Business:**

8270 COLLEGE PKWY #104  
FORT MYERS, FL 33919 US

**New Principal Place of Business:**

**Current Mailing Address:**

8270 COLLEGE PKWY  
SUITE 104  
FORT MYERS, FL 33919

**New Mailing Address:**

**FEI Number:** 59-2071152      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

CONRAD, DEBBIE  
8270 COLLEGE PKWY #104  
FORT MYERS, FL 33919 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: PD  
Name: MARRS, CAMILLE  
Address: 16373 BOYCE DR., #101  
City-St-Zip: BOKEELIA, FL 33922

Title: VPD  
Name: LAMANTIA, AUGUST  
Address: 16391 BOYCE DR., #402  
City-St-Zip: BOKEELIA, FL 33922

Title: STD  
Name: RITENOUR, NORMAN  
Address: 16385 BOYCE DR., #304  
City-St-Zip: BOKEELIA, FL 33922

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: CAMILLE MARRS

PD

03/21/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date