

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 09, 2008 8:00 am
Secretary of State

04-09-2008 90029 031 ****61.25

DOCUMENT # 749986

1. Entity Name
JASPER PLACE CONDOMINIUM ASSOCIATION, INC.



Principal Place of Business
**4611 SE 5TH PLACE
CAPE CORAL, FL 33904**

Mailing Address
**P.O. BOX 151845
CAPE CORAL, FL 33915**



2. Principal Place of Business - No P.O. Box #

3. Mailing Address

1319 MIRAMAR ST STE 101

Suite, Apt. #, etc.

Suite, Apt. #, etc.

01072008 Chg-NP CR2E037 (12/06)

City & State

City & State
CAPE CORAL FL

4. FEI Number
59-2173892

Applied For
Not Applicable

Zip

Country

Zip
33904

Country
USA

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

**ZUNINO, PAOLA
2799 DEL PRADO BLVD
CAPE CORAL, FL 33903**

7. Name and Address of New Registered Agent

Name
PAOLA ZUNINO
Street Address (P.O. Box Number is Not Acceptable)
1319 MIRAMAR ST SUITE 101
City
CAPE CORAL FL Zip Code
33904

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**Filing Fee is \$61.25
Due by May 1, 2008**

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

**Make check payable to
Florida Department of State**

10. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**P
CORYELL, JUDITH
4611 SE 5TH PL #10
CAPE CORAL, FL 33904** ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**VPD
BELLIZZI, GEORGE
4611 SE 5TH PL #5
CAPE CORAL, FL 33904** ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**STD
BENSON, CONNIE
4611 SE 5TH PL #3
CAPE CORAL, FL 33904** ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**Sec/TREASURER
BENSON, CAROL
4611 SE 5TH PL #3
CAPE CORAL, FL 33904** ☐ Change ☒ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
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☐ Change ☐ Addition

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☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-4-08 773-405-8201

Date

Daytime Phone #