## 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## **DOCUMENT#752332**

FILED Jan 05, 2007 Secretary of State

Entity Name: THE TREASURES OF CAPRI ASSOCIATION, INC.

Current Principal Place of Business: New Principal Place of Business:

5901 SUN BLVD STE 203

SAINT PETERSBURG, FL 33715 US

Current Mailing Address: New Mailing Address:

5901 SUN BLVD STE 203

SAINT PETERSBURG, FL 33715 US

FEI Number: 59-2084478 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

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

NEWTON, WILLIAM 5901 SUN BLVD SUITE 203 SAINT DETERRIDG EI

SAINT PETERSBURG, FL 33715 US

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:**

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: VPD ( ) Delete Title: TD (X) Change ( ) Addition

 Name:
 ROWDEN, PAUL
 Name:
 ROWDEN, PAUL

 Address:
 5901 SUN BLVD
 Address:
 5901 SUN BLVD

City-St-Zip: ST ETERSBURG, FL 33715 City-St-Zip: ST ETERSBURG, FL 33715

Title: SD ( ) Delete Title: D (X) Change ( ) Addition

 Name:
 MUINO, BARBARA
 Name:
 MUINO, BARBARA

 Address:
 5901 SUN BLVD
 Address:
 5901 SUN BLVD

City-St-Zip: ST PETERSBURG, FL 33715 City-St-Zip: ST PETERSBURG, FL 33715

Title: D ( ) Delete Title: ( ) Change ( ) Addition

 Name:
 CASTELLANA, DONNA
 Name:

 Address:
 5901 SUN BLVD
 Address:

 City-St-Zip:
 ST PETERSBURG, FL 33715
 City-St-Zip:

 $\label{eq:title:D} {\sf Title:} \qquad {\sf D} \qquad (\ ) \, {\sf Delete} \qquad \qquad {\sf Title:} \qquad {\sf SD} \qquad ({\sf X}) \, {\sf Change} \, (\ ) \, {\sf Addition}$ 

 Name:
 BENNINGTON, BILL
 Name:
 LYNCH, MICHAEL

 Address:
 5901 SUN BLVD
 Address:
 5901 SUN BLVD

 City-St-Zip:
 ST PETERSBURG, FL 33715
 City-St-Zip:
 ST PETERSBURG, FL 33715

 Title:
 D
 ( ) Delete
 Title:
 D
 (X) Change ( ) Addition

 Name:
 MULVEY, MARTY
 Name:
 WALSH, JIM

 Address:
 5901 SUN BLVD
 Address:
 5901 SUN BLVD

City-St-Zip: ST PETERSBURG, FL 33706 City-St-Zip: ST PETERSBURG, FL 33715

Title: PD ( ) Delete Title: PD (X) Change ( ) Addition Name: MATHER, CAROLYN Name: BRUSINI, ANDY

 Address:
 255 CAPRI CIRCLE # 27
 Address:
 5901 SUN BLVD SUITE 203

 City-St-Zip:
 TREASURE ISLAND, FL 37706
 City-St-Zip:
 ST. PETERSBURG, FL 33715

I hereby certify that the information supplied with this filing does not qualify for the 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: JIM WALSH PD 01/05/2007