


FILE NOW: FILING FEE IS \$61.25

FILED

May 05 1998 8:00am  
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT <b>1998</b>		FLORIDA DEPARTMENT OF STATE <b>Sandra B. Mortham</b> Secretary of State DIVISION OF CORPORATIONS
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**DOCUMENT # 752704 (7)**  
1. Corporation Name  
**CAPRI WEST CONDOMINIUM ASSOCIATION OF FORT LAUDE  
RDALE, INC.**



Principal Place of Business <b>1231 SE 1ST STREET FT. LAUDERDALE FL 33301</b>	Mailing Address <b>PO BOX 7503 FT LADUERDALE FL 33338 US</b>
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3. Date Incorporated or Qualified <b>06/02/1980</b>		
4. FEI Number <b>65-0055309</b>	Applied For <input type="checkbox"/>	Not Applicable <input checked="" type="checkbox"/>
5. Certificate of Status Desired <input type="checkbox"/>	<b>\$8.75 Additional Fee Required</b>	
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	<b>\$5.00 May Be Added to Fees</b>	
7. Is this nonprofit corporation a homeowners association? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		
8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		

2. Principal Place of Business	2a. Mailing Address
21. Suite, Apt. #, etc.	26. Suite, Apt. #, etc.
22. City & State	27. City & State
23. Zip	28. Zip
24. Country	29. Country
25. Country	30. Country

9. Name and Address of Current Registered Agent

**CABOT BUSINESS SERVICES, INC.  
2701 E. SUNRISE BLVD.  
SUITE 301  
FT. LAUDERDALE FL 33304**

10. Name and Address of New Registered Agent

81. Name	
82. Street Address (P.O. Box Number is Not Acceptable)	
83.	
84. City	85. Zip Code

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, 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 617.0503, Florida Statutes.

SIGNATURE \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) \_\_\_\_\_ DATE \_\_\_\_\_

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	VPD SVOBODA, RON	1.1 TITLE	VPD
NAME	1231 SE 1ST ST., #8	1.2 NAME	SANCHEZ, LIONEL
STREET ADDRESS	FT. LAUDERDALE FL	1.3 STREET ADDRESS	1231 SE 1st ST., #14
CITY-ST-ZIP		1.4 CITY-ST-ZIP	Fort Lauderdale, FL 33301
TITLE	PD ROBBINS, CARLIN	2.1 TITLE	
NAME	1231 SE 1ST ST., #5	2.2 NAME	
STREET ADDRESS	FT. LAUDERDALE FL	2.3 STREET ADDRESS	
CITY-ST-ZIP		2.4 CITY-ST-ZIP	
TITLE	ASD PARKER, SUZANNE	3.1 TITLE	D
NAME	1231 SE 1ST ST., #9	3.2 NAME	
STREET ADDRESS	FT. LAUDERDALE FL	3.3 STREET ADDRESS	
CITY-ST-ZIP		3.4 CITY-ST-ZIP	
TITLE	TD CASEY, L J	4.1 TITLE	TD
NAME	1231 SE 1ST ST., #4	4.2 NAME	GUYDISH, JANE
STREET ADDRESS	FT. LAUDERDALE FL 33301	4.3 STREET ADDRESS	1231 SE 1st St., #2
CITY-ST-ZIP		4.4 CITY-ST-ZIP	Fort Lauderdale, FL 33301
TITLE	S WISEMAN, NEILL	5.1 TITLE	SD
NAME	1231 SE 1ST ST., #12	5.2 NAME	
STREET ADDRESS	FT. LAUDERDALE FL	5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE	D GUYDISH, JANE	6.1 TITLE	
NAME	1231 SE 1ST ST., #2	6.2 NAME	
STREET ADDRESS	FT LAUDERDALE FL	6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

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CITY-ST-ZIP		1.4 CITY-ST-ZIP	Fort Lauderdale, FL 33301
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CITY-ST-ZIP		6.4 CITY-ST-ZIP	

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: *X Carlin Robbins* INQUIRED *4-24-98* 954-561-8565

CFR2037 (10/97)