

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED
Apr 29, 2004
Secretary of State**

DOCUMENT# 752704

Entity Name: CAPRI WEST CONDOMINIUM ASSOCIATION OF FORT LAUDERDALE, INC.

Current Principal Place of Business:

1231 SE 1ST STREET
FT. LAUDERDALE, FL 33301

New Principal Place of Business:

Current Mailing Address:

PO BOX 460909
FORT LAUDERDALE, FL 33346 US

New Mailing Address:

FEI Number: 65-0055309 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

MIRIDIAN REALTY MGMT.
2170 SE 17TH ST., STE. 207
FORT LAUDERDALE, FL 33316

Name and Address of New Registered Agent:

MIRIDIAN REALTY MGMT.
2170 SE 17TH ST., STE. 207
FORT LAUDERDALE, FL 33316

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: DAVID BURGESS 04/29/2004
Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: VPD () Delete
Name: SANCHEZ, LIONEL
Address: 1231 SE 1ST ST, #14
City-St-Zip: FT LAUDERDALE, FL 33301

Title: SD () Delete
Name: JOHNSON, CHERYL
Address: 1231 S.E. 1ST ST #6
City-St-Zip: FORT LAUDERDALE, FL 33301

Title: TD () Delete
Name: GRANT, GREGORY
Address: 1231 SE 1ST ST.
City-St-Zip: FORT LAUDERDALE, FL 33301

Title: PD () Delete
Name: WORTMAN, LISA
Address: 1231 S.E. 1ST ST #2
City-St-Zip: FORT LAUDERDALE, FL 33301

Title: D () Delete
Name: ERICKSON, BILL
Address: 1231 SE 1ST ST.
City-St-Zip: FORT LAUDERDALE, FL 33301

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: LISA WORTMAN PRES 04/29/2004
Electronic Signature of Signing Officer or Director Date