

FILE NOW: FILING FEE IS \$61.25

NONPROFIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **754541** (1)

1. Corporation Name

CAPRI LAGOONS CLUB CONDOMINIUM ASSOCIATION, INC.



Principal Place of Business

Mailing Address

250 104TH AVE.
TREASURE ISLAND FL 33706

250 104TH AVE.
TREASURE ISLAND FL 33706

3. Date Incorporated or Qualified
10/08/1980

3a. Date of Last Report
04/06/1995

2. Principal Place of Business

2a. Mailing Address

21 **13030 GULF BLVD.**

26 **13030 GULF BLVD.**

4. FEI Number

59-2174859

Applied For

Not Applicable

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

5. Certificate of Status Desired

☐ **\$8.75 Additional Fee Required**

City & State

City & State

23 **MADEIRA BEACH, FL**

28 **MADEIRA BEACH, FL**

6. Election Campaign Financing
Trust Fund Contribution

☐ **\$5.00 May Be Added to Fees**

Zip

Country

Zip

Country

24 **33708**

25

29 **33708**

30

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

LAMONT, SUE
250 104TH AVE.
TREASURE ISLAND FL 33705

81 Name

Doreen Moore; Total Realty Svc.

82 Street Address (P.O. Box Number is Not Acceptable)

13030 GULF BLVD.

83

84 City

MADEIRA BEACH

FL

85 Zip Code

33708

11. Pursuant to the provisions of Sections 617.0500 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

Doreen Moore

(NOTE: Registered Agent signature required when reinstating)

4/9/96

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE ☐ DELETE
NAME **PD SEDAM, WALLY**
STREET ADDRESS **12500 CAPRI CIR NO #202**
CITY-ST-ZIP **TREASURE ISLD FL**

1.1 TITLE ☒ Change ☐ Addition
1.2 NAME **Vice President/Director**
1.3 STREET ADDRESS **WALLY SEDAM**
1.4 CITY-ST-ZIP **12500 CAPRI CIR N. #202**
TREASURE ISLAND, FL 33706

TITLE ☒ DELETE
NAME **T STRACHAN, DWIGHT**
STREET ADDRESS **12500 CAPRI CIR NO #305**
CITY-ST-ZIP **TREASURE ISLD FL**

2.1 TITLE ☐ Change ☒ Addition
2.2 NAME **President/Director**
2.3 STREET ADDRESS **Geri LODATO**
2.4 CITY-ST-ZIP **12500 CAPRI CIR. N. #206**
TREASURE ISLAND, FL 33706

TITLE ☒ DELETE
NAME **VD MICK, PHILIP**
STREET ADDRESS **12500 CAPRI CIR NO #406**
CITY-ST-ZIP **TREASURE ISLD FL**

3.1 TITLE ☐ Change ☒ Addition
3.2 NAME **Secretary/Treasurer/Director**
3.3 STREET ADDRESS **JEAN BAWERS**
3.4 CITY-ST-ZIP **12500 CAPRI CIR N. #304**
TREASURE ISLAND, FL 33706

TITLE ☒ DELETE
NAME **D BECKON, WEIR**
STREET ADDRESS **12500 CAPRI CIRCLE N #401**
CITY-ST-ZIP **TREASURE ISLAND FL**

4.1 TITLE ☐ Change ☐ Addition
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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:

Jean Bawers

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-27-96

DATE

630-7323

DAYTIME PHONE #

CR2E037 (12/95)