## **2001 UNIFORM BUSINESS REPORT (UBR)**

## Feb 05, 2001 8:00 am Secretary of State DOCUMENT # 756356 1. Entity Name THE CAPER BEACH CLUB CONDOMINIUM ASSOCIATION. IN 02-05-2001 90035 026 \*\*\*\*61.25 Principal Place of Business Mailing Address 2810 ESTERO BLVD. 2810 ESTERO BLVD. FT MYERS BEACH FL 33931 FT MYERS BEACH FL 33931 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State Applied For 4. FEI Number 59-2158655 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired П Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) DEGNAN, JANIS A 250 NATURE VIEW COURT FT. MYES BCH FL 33931 Zip Code FL 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. SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE 9. Election Campaign Financing FILE NOW: Make Check Payable to \$5.00 May Be Trust Fund Contribution. FEE IS \$61.25 Added to Fees **Department of State** OFFICERS AND DIRECTORS 10. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 11. D TITLE ☐ Delete TITLE ☐ Change XXX Addition HIGGINS, BOB .... NAME COX, DONALD NAME 16304 EDGEMONT DRIVE STREET ADDRESS 5139 EMERALD DRIVE STREET ADDRESS CITY-ST-ZIP FORT MYERS, FL 33908 MOUND MN CITY-ST-ZIP TITLE ☐ Delete TITLE **XX** Change ☐ Addition GRANDONICO, PETER GRANDONICO, PETER NAME NAME 25 N. PLEASANT DR STREET ADDRESS 25 N PLEASANT DR STREET ADDRESS AMHERST MATO1002 CITY-ST-7IP AMHERST MA 01002 CITY-ST-ZIP TITLE XXXChange ☐ Delete TITLE ☐ Addition MACHNO, FRAN MACHNO, FRAN M NAME NAME STREET ADDRESS 2800 ESTERO BLVD #501 2800 ESTERO BLVD #501 STREET ADDRESS CITY-ST-ZIP FT. MYERS BEACH FL CITY-ST-ZIP FT. MYERS BEACH, FL 33931 ☐ Delete TITLE Change ☐ Addition HINTZ, JUDY NAME NAME STREET ADDRESS 2800 ESTERO BLVD STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP FT MYERS BEACH FL ☐ Delete TITLE ☐ Change ☐ Addition GOOD, HARRISON NAME NAME STREET ADDRESS 2800 ESTERO BLVD 201 STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP FT MYERS BCH FL VP XXX Change ☐ Delete TIT! F ☐ Addition DUVAL, PAUL NAME DUVAL, PAUL NAME STREET ADDRESS 241 TVHOLET DR 241 VIOLET DR STREET ADDRESS CITY-ST-7IP SANIBEL FL 33957 SANIBEL, FL 33957

FILED

12. 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 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:

\*\*Treasurer\*\*

\*\*Only 1941-463-1423\*

\*\*SIGNATURE AND TYPE OR PRINTED AND OR SIGNING RESIGNS DIRECTOR.\*\*