

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 21, 2005 8:00 am
Secretary of State

03-21-2005 90077 043 ****61.25

DOCUMENT # 756356 1. Entity Name THE CAPER BEACH CLUB CONDOMINIUM ASSOCIATION, INC.					
Principal Place of Business 2810 ESTERO BLVD. FT MYERS BEACH, FL 33931			Mailing Address 2810 ESTERO BLVD. FT MYERS BEACH, FL 33931		
2. Principal Place of Business		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State			
Zip	Country	Zip	Country	4. FEI Number 59-2158655	
				Applied For ☐ Not Applicable	
				5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent			7. Name and Address of New Registered Agent		
DEGNAN, JANIS A 250 NATURE VIEW COURT FT. MYERS BCH, FL 33931			Name, DEGNAN, JANIS A Street Address (P.O. Box Number is Not Acceptable) 1644 N. MAYFAIR RD City FORT MYERS FL Zip Code 33919		
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. I am familiar with, and accept the obligations of registered agent.					
SIGNATURE <u><i>Janis A. Degnan</i></u> 3-11-05 Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE					
Filing Fee is \$61.25 Due by May 1, 2005		9. Election Campaign Financing Trust Fund Contribution. ☐		\$5.00 May Be Added to Fees	
Make check payable to Florida Department of State					
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE	P ☐ Delete	TITLE	☐ Change ☐ Addition		
NAME	GRANDONICO, PETER	NAME			
STREET ADDRESS	2800 ESTERO BLVD #1004	STREET ADDRESS			
CITY-ST-ZIP	FORT MYERS BEACH, FL 33931	CITY-ST-ZIP			
TITLE	D ☒ Delete	TITLE	☐ Change ☒ Addition		
NAME	HIGGINS, BOB	NAME	JOHNSON, ROBERT		
STREET ADDRESS	1775 JAMAICA WAY	STREET ADDRESS	2450 VALPARAISO BLVD		
CITY-ST-ZIP	PUNTA GORDA, FL 33950	CITY-ST-ZIP	N. Ft. MYERS, FL 33917		
TITLE	S ☐ Delete	TITLE	☐ Change ☐ Addition		
NAME	PETRO, JANET	NAME			
STREET ADDRESS	2800 ESTERO BLVD # 505	STREET ADDRESS			
CITY-ST-ZIP	FORT MYERS BEACH, FL 33931	CITY-ST-ZIP			
TITLE	D ☐ Delete	TITLE	☐ Change ☐ Addition		
NAME	VANDEN BERG, WILL	NAME			
STREET ADDRESS	2810 ESTERO BLVD # 512	STREET ADDRESS			
CITY-ST-ZIP	FORT MYERS BEACH, FL 33931	CITY-ST-ZIP			
TITLE	T ☐ Delete	TITLE	☒ Change ☐ Addition		
NAME	LASH, RON	NAME	Treasurer RONALD D. LASH		
STREET ADDRESS	2800 ESTERO BLVD #1003	STREET ADDRESS	2800 Estero #1003		
CITY-ST-ZIP	FORT MYERS BEACH, FL 33931	CITY-ST-ZIP	FT. MYERS Bch Flo 33931		
TITLE	V ☐ Delete	TITLE	☐ Change ☐ Addition		
NAME	DINGLE, LINDA	NAME			
STREET ADDRESS	2800 ESTERO BLVD # 304	STREET ADDRESS			
CITY-ST-ZIP	FORT MYERS BEACH, FL 33931	CITY-ST-ZIP			
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: <u><i>Peter Grandonico</i></u> Peter Grandonico 3-14-05 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #					