2007 NOT-FOR-PROFIT CORPORATION

FILED Jul 16, 2007 8:00 am

| | ANNUAL | > | Secretary of State | | | | | |
|---|--|--|--|---|--|---------------------------|-------------------|--|
| DOCUMENT # 756356 1. Entity Name | | | | | 07-16-2007 9012 | 6 034 **** | 51.25 | |
| THE CAPER BEACH CLUB CONDOMINIUM ASSOCIATION, INC. | | | | | | | | |
| 2810 ESTERO BLVD. | | Mailing Address 2810 ESTERO BLVD. FT MYERS BEACH, FL 33931 | | | | | | |
| Principal Place of Business - No P.O. Box # 3. No P. | | 3. Mailing Address | | | | | | |
| Suite, Apt. #, etc. | | Suite, Apt. #, etc. | | 07102007 C | hg-NP CR2E | 037 (12/06) | | |
| City & State | | City & State | | 4. FEI Number 59-215865 | 4. FEI Number Applied For 59-2158655 Not Applicable | | | |
| Zip | Country | Zip | Country | 5. Certificate of St | atus Desired | \$8.75 Add Fee Require | | |
| <u> </u> | 6. Name and Address of Current R | egistered Agent | | 7. Name and Add | ress of New Registere | d Agent | | |
| DEGNAN, JANIS A 1644 N MAYFAIR RD | | | Name Street Addi | Name Street Address (P.O. Box Number is Not Acceptable) | | | | |
| FORT MY | ERS, FL 33919 | | | | | | | |
| | | City | | F | | | | |
| 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 Signature, typed or printed name pregistered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE | | | | | | | | |
| | | | | | | | | |
| | Filing Fee is \$61.25 ue by September 14, 2007 | Trust Fund C | Election Campaign Financing Trust Fund Contribution. | | \$5.00 May Be Added to Fees Make check payable to Florida Department of State | | | |
| 10. | OFFICERS AND DIRE | | 11. | | ES TO OFFICERS AND | DIRECTORS IN | | |
| NAME STREET ADDRESS CITY-ST-ZIP | P GRANDONICO, PETER 2800 ESTERO BLVD #1004 FORT MYERS BEACH, FL 33931 | ⊠ Delete | STREET ADDRESS |) HERRON, TER 2810 ESTERO Ft. MYERS BE | S BLUD #711 | □ Change | Addition Addition | |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | S JOHNSON, ROBERT 2450 VALDARAISO BLVD NORTH FORT MYERS, FL 33917 | ☐ Delete | NAME JOSESS 2 | 5 OHNSON, ROB 1810 ESTERO FLMYERS BEI | BERT BL VD #1014 | Change Change | Addition | |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | D GAMAUF, DON 2800 ESTERO BLVD, # 502 FORT MYERS BEACH, FL 33931 | ☐ Delete | TITLE NAME STREET ADDRESS CITY-ST-ZIP | 1.myees 1321 | ica / E 5 - / | ☐ Change | ☐ Addition | |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | D VANDEN BERC, WILL 2810 ESTERO BLVD # 512 FORT MYERS BEACH, FL 33931 | ☐ Delete | | HANDEN BERG 1810 ESTERO K FORT MYERS B | | X Change 3931 | ☐ Addition | |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | T LASH, RONALD D 2800 ESTERO BLVD #1003 FORT MYERS BEACH, FL 33931 | ☐ Delete | TITLE NAME STREET ADDRESS CITY-ST-ZIP | | | ☐ Change | ☐ Addition | |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | V DINGLE, LINDA 2800 ESTERO BLVD # 304 FORT MYERS BEACH, FL 33931 | □ Delete | TITLE NAME STREET ADDRESS CITY-ST-ZIP | | | Change | ☐ Addition | |

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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. TERRY W. HERRON, DIRECTOR

SIGNATURE:

SKNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

7-10-07 Date 239-463-1423 Daytime Phone ■