

2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 761784

FILED
Mar 22, 2012
Secretary of State

Entity Name: VILLAS OF CAPRI HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:

1133 SOUTH UNIVERSITY DRIVE
SUITE 211
PLANTATION, FL 33324

New Principal Place of Business:

1133 SOUTH UNIVERSITY DRIVE
211
PLANTATION, FL 33324

Current Mailing Address:

C/O ALLIANCE PROPERTY SYSTEMS
P.O. BOX 19439
PLANTATION, FL 33318

New Mailing Address:

PO BOX 19439
PLANTATION, FL 33318

FEI Number: 59-2160947

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BAKALAR & EICHNER, P.A.
150 SOUTH PINE ISLAND ROAD
SUITE 540
PLANTATION, FL 33324 US

Name and Address of New Registered Agent:

BAKALAR & ASSOCIATES, P.A.
150 SOUTH PINE ISLAND ROAD
SUITE 540
PLANTATION, FL 33324 US

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: SUSAN BAKALAR

03/22/2012

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: DP
Name: ORR, VILMA
Address: 9682 NW 45 STREET
City-St-Zip: SUNRISE, FL 33351

Title: DS
Name: OCCHIONERO, RITA A
Address: 4455 NW 97 TERR
City-St-Zip: SUNRISE, FL 33351

Title: DT
Name: JOHNS, NANCY C.
Address: 9603 NW 45 STREET
City-St-Zip: SUNRISE, FL 33351

I hereby 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 all other like empowered.

SIGNATURE: VILMA ORR

PRES

03/22/2012

Electronic Signature of Signing Officer or Director

Date