

# **2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 766503

**FILED**  
**Apr 21, 2010**  
**Secretary of State**

**Entity Name:** CAPTIVA HIDE-A-WAY CONDOMINIUM ASSOCIATION, INC.

**Current Principal Place of Business:**

11400 OLD LODGE LANE  
P. O. BOX 850  
CAPTIVA, FL 33924

**New Principal Place of Business:**

**Current Mailing Address:**

11400 OLD LODGE LANE  
P. O. BOX 850  
CAPTIVA, FL 33924

**New Mailing Address:**

**FEI Number:** 59-2362098

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

SKUBAL, MARLENE  
11406 OLD LODGE LANE  
CAPTIVA, FL 33924 US

**Name and Address of New Registered Agent:**

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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

Title: TD  
Name: MASON, JOHN  
Address: 151 WEST HUTCHINSON AVE  
City-St-Zip: PITTSBURGH, PA 15219

Title: PD  
Name: BEGGS, JOHN  
Address: 11400 OLD LODGE LANE  
City-St-Zip: CAPTIVA, FL 33924

Title: SD  
Name: MASON, CINDY  
Address: 151 WEST HUTCHINSON AVE  
City-St-Zip: PITTSBURGH, PA 15219

Title: VD  
Name: MASON, CINDY  
Address: 151 WEST HUTCHINSON AVE  
City-St-Zip: PITTSBURGH, PA 15219

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: MARLENE SKUBAL

MGR

04/21/2010

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date