

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 14, 2007 8:00 am
Secretary of State

03-14-2007 90021 013 ****61.25

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1. Entity Name
CAPE REGATTA CONDOMINIUM ASSOCIATION, INC.



Principal Place of Business
2517 SANTA BARBARA BLVD #11
CAPE CORAL, FL 339-1405 US

Mailing Address
2517 SANTA BARBARA BLVD #11
P.O. BOX 100831
CAPE CORAL, FL 339-1405 US

40053004



2. Principal Place of Business - No P.O. Box #
SW 48th Terrace

3. Mailing Address

02142007 Chg-NP CR2E037 (12/06)

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State
Cape Coral, FL

City & State

4. FEI Number
59-2410121

Applied For
Not Applicable

Zip
33914

Country

Zip

Country

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

GEORGE, TEAQUE
C/O PROFESSIONALLY YOURS INC
8270 COLLEGE PKWY # 103
FORT MYERS, FL 33919

Name

Street Address (P.O. Box Number is Not Acceptable)

2503 Del Prado, #500

City
Cape Coral

FL

Zip Code
33904

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 of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

Filing Fee is \$61.25
Due by May 1, 2007

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
NAME
STREET ADDRESS
CITY-ST-ZIP
D
LAMB, GEORGE ☐ Delete
816 SW 48TH TERRACE # C-102
CAPE CORAL, FL 33914

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
P ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
TD
TOTH, LARRY ☐ Delete
4817 SW 8TH PLACE # D-103
CAPE CORAL, FL 33914

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
S
RAY, PMD, SONIA ☐ Delete
4811 SW 8TH E 102
CAPE CORAL, FL 33914

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
S
Sonis Raymond ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
PD
LORENZ, DON ☒ Delete
822 SW 48TH TERRACE # A02
CAPE CORAL, FL 33914

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
D
Annette Cornie ☐ Change ☒ Addition
4805 SW 8th place # B101
Cape Coral FL 33914

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
VP
Patti Harris ☐ Change ☒ Addition
816 SW 48th Terr. #C103
Cape Coral, FL 33914

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
D
Joseph Corrado ☐ Change ☒ Addition
207 West Glade
Palatka, IL 60067

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

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/5/07

Date

Daytime Phone #