


2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Apr 04, 2005 08:00 AM
Secretary of State

DOCUMENT # 770434			
1. Entity Name THE CAPRI OF SINGER ISLAND CONDOMINIUM ASSOCIATION, INC.			
Principal Place of Business 5250 NORTH OCEAN DRIVE SINGER ISLAND FL 33404		Mailing Address 5250 NORTH OCEAN DRIVE SINGER ISLAND FL 33404	
2. Principal Place of Business		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country



1st MOORE CR2E037 (10/04)

4. FEI Number 59-2462989		Applied For <input type="checkbox"/> Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent KUCHER, KENNETH 5250 NORTH OCEAN DRIVE SINGER ISLAND FL 33404		7. Name and Address of New Registered Agent	
		Name	
		Street Address (P.O. Box Number is Not Acceptable)	
		City	FL Zip Code

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 _____ DATE _____
Signature typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

FILE NOW: 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	D <input type="checkbox"/> Delete JONES, GREY 5250 NORTH OCEAN DRIVE SINGER ISLAND FL 33404	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition 000000288268 04/05/05-80003-005 61.25
TITLE	D <input type="checkbox"/> Delete ASSEF, RON 5250 NORTH OCEAN DRIVE SINGER ISLAND FL 33404	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE	S <input type="checkbox"/> Delete BORTOLUSSI, MARY 193 CONNAUGHT AVE WILLOWDALE, ONTARIO, CANADA M2M -1T5	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE	P <input type="checkbox"/> Delete KUCHER, KENNETH 61 PHEASANT LANE ISLINGTON, ONTARIO, CANADA M9A -1T5	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE	VPT <input type="checkbox"/> Delete DRY, MICKEY 5250 N. OCEAN DR SINGER ISLAND FL 33404	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(j), 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: Wesley W. Dry
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR