

2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 770434

FILED
Mar 17, 2011
Secretary of State

Entity Name: THE CAPRI OF SINGER ISLAND CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

5250 NORTH OCEAN DRIVE
SINGER ISLAND, FL 33404

New Principal Place of Business:

Current Mailing Address:

5250 NORTH OCEAN DRIVE
SINGER ISLAND, FL 33404

New Mailing Address:

FEI Number: 59-2462989

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ASSEF, RON
5250 NORTH OCEAN DRIVE
#8-N
SINGER ISLAND, FL 33404 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: D
Name: JONES, GREY
Address: 5250 NORTH OCEAN DRIVE #17 N
City-St-Zip: SINGER ISLAND, FL 33404

Title: P
Name: ASSEF, RON
Address: 5250 NORTH OCEAN DRIVE #8 N
City-St-Zip: SINGER ISLAND, FL 33404

Title: S
Name: BORTOLUSSI, MARY
Address: 193 CONNAUGHT AVE
City-St-Zip: WILLOWDALE, ONTARIO, CANADA, M2M 1T5

Title: D
Name: NEFF, LARRY
Address: 5250 N. OCEAN DR. #3 S
City-St-Zip: WEST PALM BEACH, FL 33404

Title: VP/T
Name: DERING, LISA
Address: 5250 N. OCEAN DR #12-N
City-St-Zip: SINGER ISLAND, FL 33404

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: RON ASSEF

PRES

03/17/2011

Electronic Signature of Signing Officer or Director

Date