

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
Sandra B. Mathum
Secretary of State
DIVISION OF CORPORATIONS

APPROVED
AND
FILED

95 MAY -1 PM 2:38

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # K52079

(6)

1. Corporation Name

CAPRI APARTMENTS, INC.

Principal Place of Business

C/O RONALD A. FOLLOW
2295 CORPORATE BLVD., NW, STE 145
BOCA RATON FL 33431
US

Mailing Address

C/O RONALD A. FOLLOW
2295 CORPORATE BLVD., NW, STE 145
BOCA RATON FL 33431
US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified 12/09/1988	3a. Date of Last Report 04/26/1994
4. FEI Number 65-0097932	Applied For ☐ Not Applicable
5. Certificate of Status Desired ☐	\$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution ☐	\$5.00 May Be Added to Fees
8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes ☐ Yes ☒ No	

2. Principal Place of Business 21. Capri Apartments, Inc. Suite, Apt. #, etc. 625 Royal Palm Boulevard City & State Vero Beach, Florida Zip 32960	2a. Mailing Address 26. Capri Apartments Inc. Suite, Apt. #, etc. PO Box 6126 City & State Vero Beach, Florida Zip 32961
25. Indian River	30. Indian River

9. Name and Address of Current Registered Agent

POLLOW, RONALD A.
2295 CORPORATE BLVD, NW
STE 145
BOCA RATON FL 33431

10. Name and Address of New Registered Agent

81. Name Michael R. Dubuque	85. Zip Code 32966
82. Street Address (P.O. Box Number is Not Acceptable) 4640 - 8th Street	
83. City Vero Beach, FL	

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE Michael R. Dubuque DPT

Michael R. Dubuque 4/18/95

Signature typed or printed name of registered agent and the corporation

(NOTE: Registered Agent signature required when reappointing)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE DPT	NAME DUBUQUE, MICHAEL R.	1.1 TITLE DPT	☒ Change ☐ Addition
STREET ADDRESS 642 BUNTING DR.	CITY ST ZIP VERO BEACH FL	1.2 NAME Dubuque, Michael R.	
		1.3 STREET ADDRESS 4640 - 8th Street	
		1.4 CITY ST ZIP Vero Beach, FL. 32966	
TITLE DVS	NAME DUBUQUE, MARGARET	2.1 TITLE DVS	☒ Change ☐ Addition
STREET ADDRESS 642 BUNTING DR.	CITY ST ZIP VERO BEACH FL	2.2 NAME Dubuque, Margaret	
		2.3 STREET ADDRESS 4640 - 8th Street	
		2.4 CITY ST ZIP Vero Beach, FL. 32966	
TITLE	NAME	3.1 TITLE	☐ Change ☐ Addition
STREET ADDRESS	CITY ST ZIP	3.2 NAME	
		3.3 STREET ADDRESS	
		3.4 CITY ST ZIP	
TITLE	NAME	4.1 TITLE	☐ Change ☐ Addition
STREET ADDRESS	CITY ST ZIP	4.2 NAME	
		4.3 STREET ADDRESS	
		4.4 CITY ST ZIP	
TITLE	NAME	5.1 TITLE	☐ Change ☐ Addition
STREET ADDRESS	CITY ST ZIP	5.2 NAME	
		5.3 STREET ADDRESS	
		5.4 CITY ST ZIP	
TITLE	NAME	6.1 TITLE	☐ Change ☐ Addition
STREET ADDRESS	CITY ST ZIP	6.2 NAME	
		6.3 STREET ADDRESS	
		6.4 CITY ST ZIP	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 607, Florida Statutes, and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: Michael R. Dubuque Michael R. Dubuque 4/18/95 (407)589-2910

SIGNATURE AND TYPED ON PRINTED NAME OF FINANCING OFFICER OR DIRECTOR

Date