

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01000007916

FILED
Mar 02, 2007
Secretary of State

Entity Name: CAPE CORAL OWNERS ASSOCIATION, INC.

Current Principal Place of Business:

463499 SR 200
YULEE, FL 32097 US

New Principal Place of Business:

15145 REEF DR. N
JACKSONVILLE, FL 32226 US

Current Mailing Address:

P O BOX 1987
YULEE, FL 32041 US

New Mailing Address:

15145 REEF DR. N
JACKSONVILLE, FL 32226 US

FEI Number: 59-3754159

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PROPERTY MANAGEMENT SYSTEMS, INC
P O BOX 1987
YULEE, FL 320411987 US

Name and Address of New Registered Agent:

CAPE CORAL HOMEOWNERS ASSOCIATION INC.
15145 REEF DR. N
JACKSONVILLE, FL 32226 US

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: CAPE CORAL HOMEOWNERS ASSOCIATION INC.

03/02/2007

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: SD () Delete
Name: MATOVINA, GREGORY E
Address: 2955 HARTLEY RD, SUITE 108
City-St-Zip: JACKSONVILLE, FL 32257

Title: PD () Delete
Name: SHACTER, DAVID A
Address: 1031 LASALLE ST
City-St-Zip: JACKSONVILLE, FL 32207

Title: VTD () Delete
Name: FIBBE, VICKIE
Address: 1031 LASALLE ST
City-St-Zip: JACKSONVILLE, FL 32207

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: SD (X) Change () Addition
Name: SULLIVAN, MATTHEW M
Address: 15145 REEF DR N
City-St-Zip: JACKSONVILLE, FL 32226

Title: PD (X) Change () Addition
Name: LITTLE, BOB
Address: 14942 REEF DR N
City-St-Zip: JACKSONVILLE, FL 32226

Title: VTD (X) Change () Addition
Name: MATISE, ALEX
Address: 14754 REEF CT
City-St-Zip: JACKSONVILLE, FL 32226

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated 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 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 an address, with all other like empowered.

SIGNATURE: MATTHEW SULLIVAN

SD

03/02/2007

Electronic Signature of Signing Officer or Director

Date