

2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01119

FILED
Apr 19, 2011
Secretary of State

Entity Name: THE CAPE PARKWAY CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

C/O AMERICAN CONDO MGMT
615 CAPE CORAL PKWY W 103
CAPE CORAL, FL 33914 US

New Principal Place of Business:

Current Mailing Address:

C/O AMERICAN CONDO MGMT
615 CAPE CORAL PKWY W 103
CAPE CORAL, FL 33914 US

New Mailing Address:

FEI Number: 59-2428802

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

KASE, SUSAN M
C/O AMERICAN CONDOMINIUM MANAGEMENT
615 CAPE CORAL PARKWAY, W #103
CAPE CORAL, FL 33914 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: PD
Name: KATZ, VINCENT
Address: 1429 CAPE CORAL PKWY #8
City-St-Zip: CAPE CORAL, FL 33914

Title: VP
Name: RUSAK, JANICE
Address: 1507 CAPE CORAL PKWY W
City-St-Zip: CAPE CORAL, FL 33914

Title: S
Name: PERSON, RUTH
Address: 1519 CAPE CORAL PKWY #8
City-St-Zip: CAPE CORAL, FL 33914

Title: T
Name: PERSON, LOU
Address: 1519 CAPE CORAL PKWY SUITE#11
City-St-Zip: CAPE CORAL, FL 33914

Title: D
Name: DEROBERTIS, GIUSEPPE
Address: 1519 CAPE CORAL PKWY #7
City-St-Zip: CAPE CORAL, FL 33914

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: VINCENT KATZ

PRES

04/19/2011

Electronic Signature of Signing Officer or Director

_____ Date