

# 2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000000740

FILED  
May 05, 2005  
Secretary of State

Entity Name: CAPISTRANO PALMS CONDOMINIUM ASSOCIATION, INC.

## Current Principal Place of Business:

433 SWALLOW DR.  
208  
MIAMI SPRINGS, FL 33166

## New Principal Place of Business:

433 SWALLOW DR.  
207  
MIAMI SPRINGS, FL 33166

## Current Mailing Address:

433 SWALLOW DR  
208  
MIAMI SPRINGS, FL 33166

## New Mailing Address:

433 SWALLOW DR  
207  
MIAMI SPRINGS, FL 33166

FEI Number: 65-0964306      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )  
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

## Name and Address of Current Registered Agent:

SALEEBY, BRIDGETTE G  
433 SWALLOW DR  
208  
MIAMI SPRINGS, FL 33166 US

## Name and Address of New Registered Agent:

RIVERA, RICHARD A  
433 SWALLOW DR  
207  
MIAMI SPRINGS, FL 33166 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: RICHARD RIVERA

05/05/2005

Electronic Signature of Registered Agent

Date

## OFFICERS AND DIRECTORS:

Title: P ( ) Delete  
Name: RIVERA, RICHARD  
Address: 433 SWALLOW DR. #207  
City-St-Zip: MIAMI SPRINGS, FL 33166

Title: T ( ) Delete  
Name: SALEEBY, BRIDGETTE G  
Address: 433 SWALLOW DR #208  
City-St-Zip: MIAMI SPRINGS, FL 33166

Title: S ( ) Delete  
Name: CASTILLO, NOLA  
Address: 288 WREN AVE  
City-St-Zip: MIAMI SPRING, FL 33166

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: T (X) Change ( ) Addition  
Name: THOMPSON, DIANE  
Address: 433 SWALLOW DR #201  
City-St-Zip: MIAMI SPRINGS, FL 33166

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: RICHARD RIVERA

P

05/05/2005

Electronic Signature of Signing Officer or Director

Date