

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED
Apr 15, 2009
Secretary of State**

DOCUMENT# N03000010241

Entity Name: CAPRINI HOMEOWNER'S ASSOCIATION, INC.

Current Principal Place of Business:

VIA CAPRINI DRIVE
FORT MYERS, FL 33913

New Principal Place of Business:

Current Mailing Address:

COLLIER FINANCIAL, INC.
4985 TAMIAMI TRAIL E.
NAPLES, FL 34113

New Mailing Address:

FEI Number: 20-0718235 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HART, STEPHEN P
COLLIER FINANCIAL INC
4985 TAMIAMI TRAIL E
NAPLES, FL 34113 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: VD () Delete
Name: GRENNES, JR, ROBERT
Address: 18221 VIA CAPRINI DRIVE
City-St-Zip: FT. MYERS, FL 33913

Title: PD () Delete
Name: STURDYVIN, DAVID M
Address: 1845 TRADE CENTER WAY
City-St-Zip: NAPLES, FL 34109

Title: STD () Delete
Name: FITTERMAN, MATHEW
Address: 1845 TRADE CENTER WAY
City-St-Zip: NAPLES, FL 34109

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

I hereby certify that the information supplied with this filing does not qualify 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: DAVID STURDYVIN

PD

04/15/2009

Electronic Signature of Signing Officer or Director

Date