

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000006247

FILED
Mar 18, 2009
Secretary of State

Entity Name: CAPSTONE QUARTERS CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

C/O ACTION REAL ESTATE SERVICES
6001- B NW 1ST PL
GAINESVILLE, FL 32607

New Principal Place of Business:

Current Mailing Address:

C/O ACTION REAL ESTATE SERVICES
6110-B NW 1ST PL
GAINESVILLE, FL 32607

New Mailing Address:

FEI Number: 20-3021344

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ACTION REAL ESTATE SERVICESX
6110-B NW 1ST PL
GAINESVILLE, FL 32607 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 (X) Delete
Name: KENNEDY, JOHN J
Address: 5919 NW 84TH TER
City-St-Zip: GAINESVILLE, FL 32653 US

Title: PD () Delete
Name: WALKER, BEN W IV
Address: 431 OFFICE PARK DRIVE
City-St-Zip: BIRMINGHAM, AL 35223

Title: D () Delete
Name: LENTINE, RONALD
Address: 2028 PEREGRINE CT
City-St-Zip: PENSACOLA, FL 32506

Title: SD () Delete
Name: THIBAUT, JEFF
Address: 9538 WEST PARK VILLAGE DR
City-St-Zip: TAMPA, FL 33261

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: DT (X) Change () Addition
Name: LENTINE, RONALD
Address: 2028 PEREGRINE CT
City-St-Zip: PENSACOLA, FL 32506

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: BEN WALKER

P

03/18/2009

Electronic Signature of Signing Officer or Director

Date