

# 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06404

FILED  
Apr 19, 2007  
Secretary of State

Entity Name: CAPISTRANO CONDOMINIUM OWNERS' ASSOCIATION, INC.

**Current Principal Place of Business:**

5311 E COUNTY HWY 30-A  
SANTA ROSA BEACH, FL 32459

**New Principal Place of Business:**

5311 E COUNTY HWY 30-A  
STE 5  
SANTA ROSA BEACH, FL 32459

**Current Mailing Address:**

5311 E COUNTY HWY 30-A  
STE 5  
SANTA ROSA BEACH, FL 32459 US

**New Mailing Address:**

FEI Number: 59-3227980      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

PRITCHETT, WALTER R  
5311 E COUNTY HWY 30-A  
STE 5  
SANTA ROSA BEACH, FL 32459 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: DT ( ) Delete  
Name: HARPER, JOHN  
Address: 1110 LAUREL AVE  
City-St-Zip: DOTHAN, AL 36301

Title: DP ( ) Delete  
Name: WAGNER, DEAN  
Address: 945 CHARTERHOUSE CT  
City-St-Zip: WESTERFIELD, OH 43081

Title: DS ( ) Delete  
Name: CAVANAGH, JOAN  
Address: 589 ASPEN WOODS DRIVE  
City-St-Zip: YARDLEY, PA 19067

Title: DV ( ) Delete  
Name: COCHRAN, STAN  
Address: 136 SOUTH CREEK  
City-St-Zip: FRANKFORT, KY 40601

Title: D ( ) Delete  
Name: SONDRUP, BARBARA  
Address: 3308 GREENBRIER DRIVE  
City-St-Zip: DALLAS, TX 75225

**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:

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 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: WALTER R PRITCHETT

MGR

04/19/2007

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date