2003 NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 17, 2003 8:00 am
Secretary of State
03-17-2003 91086 018 ****61.25

DOCUMENT # N06995

1. Entity Name
THE CAPE CONDOMINIUM ASSOCIATION, INC.

Principal Place of Business	Mailing Address
3979 CAPE HAZE DR ROTONDA WEST FL 33947 US	PO BOX 233 PLACIDA FL 33946-0233 US

☐ CHECK HERE IF MAKING CHANGES

2. Principal Place of Business	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Zip / Country	Zip / Country

4. FEI Number 59-2648880 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

TEAGLE, DOROTHY
3979 CAPE HAZE DR., #10
ROTONDA WEST FL 33947

7. Name and Address of New Registered Agent

Name Richard Knox
Street Address (P.O. Box Number is Not Acceptable) 3979 Cape Haze Dr #16
City Rotonda West FL Zip Code 33947

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE Richard Knox President Director Richard R. Knox 3/12/03
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW: FEE IS $61.25

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

Make Check Payable to Florida Department of State

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	TD GILCHRIST, DOROTHY 3979 CAPE HAZE DR., #12 ROTONDA WEST FL 33947	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	T D M. Ballinger 3979 Cape Haze Dr #15 Rotonda West FL 33947 ☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	SD KNOX, RICHARD 3979 CAPC HAZE DR #16 ROTONDA WEST FL 33947	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PD Knox, Richard 3979 Cape Haze Dr # 16 Rotonda West FL 33947 ☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PD TEAGLE, DOROTHY 3979 CAPE HAZE DR #10 ROTONDA WEST FL 33947	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D BULWAN, B 281 ANNAPOLIS LANE ROTONDA WEST FL 33947	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D M. Storey P.O. Box 514 Placida FL 33946 ☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VPD SHIRK, D 3979 CAPE HAZE DR 2 ROTONDA WEST FL 33947	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition

CR2E037 (10/02)

12. I hereby certify that the information supplied with this filing does not qualify 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: R. Knox SIGNATURE Richard R. Knox 3/12/03 941-697-3333