

# **2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N07000009676

**FILED**  
**Mar 04, 2011**  
**Secretary of State**

**Entity Name:** REFLECTIONS OF CAPE CORAL CONDOMINIUM ASSOCIATION, INC.

**Current Principal Place of Business:**

W359 S2521 HUNTERS LAKE ROAD  
DOUSMAN, WI 53118 US

**New Principal Place of Business:**

**Current Mailing Address:**

W359 S2521 HUNTERS LAKE ROAD  
DOUSMAN, WI 53118 US

**New Mailing Address:**

**FEI Number:**

**FEI Number Applied For ( )**

**FEI Number Not Applicable (X)**

**Certificate of Status Desired ( )**

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

SCHUTT, DARRIN R ESQ.  
1105 CAPE CORAL PARKWAY EAST  
SUITE C  
CAPE CORAL, FL 33904 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: PD  
Name: REICHERT, GARY A  
Address: W359 S2521 HUNTERS LAKE ROAD  
City-St-Zip: DOUSMAN, WI 53118 US

Title: SVD  
Name: REICHERT, BONNIE J  
Address: 1624 BEACH PARKWAY #202  
City-St-Zip: CAPE CORAL, FL 33904 US

Title: D  
Name: SCHUTT, DARRIN R ESQ  
Address: 1105 CAPE CORAL PARKWAY EAST, SUITE C  
City-St-Zip: CAPE CORAL, FL 33904 US

I hereby 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 all other like empowered.

**SIGNATURE:** GARY REICHERT

PD

03/04/2011

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date