

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

DOCUMENT# N07960

**FILED**  
**Apr 14, 2011**  
**Secretary of State**

**Entity Name:** CAPRI HARBOR SOUTH CONDOMINIUM ASSOCIATION, INC.

**Current Principal Place of Business:**

12110 CAPRI CIR S  
TREASURE ISLAND, FL 33706 US

**New Principal Place of Business:**

**Current Mailing Address:**

RESOURCE PROPERTY MANAGEMENT  
7300 PARK STREET  
SEMINOLE, FL 33777 US

**New Mailing Address:**

**FEI Number:** 59-2877340      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**

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

THOMAS, DOROTHY  
7300 PARK STREET  
SEMINOLE, FL 33777 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: P  
Name: ELLIS, JAMES  
Address: 7300 PARK STREET  
City-St-Zip: SEMINOLE, FL 33777

Title: D  
Name: GAUSS, CHRISTINE  
Address: 7300 PARK STREET  
City-St-Zip: SEMINOLE, FL 33777

Title: VP  
Name: ARCENEUX, MICHAEL  
Address: 7300 PARK STREET  
City-St-Zip: SEMINOLE, FL 33777

Title: D  
Name: KIEFFER, JON  
Address: 7300 PARK STREET  
City-St-Zip: SEMINOLE, FL 33777

Title: T/S  
Name: MEEHAN, BILL  
Address: 7300 PARK STREET  
City-St-Zip: SEMINOLE, FL 33777

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: JIM ELLIS

P

04/14/2011

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

\_\_\_\_\_  
Date