

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

DOCUMENT# N25145

**FILED**  
**Jan 06, 2011**  
**Secretary of State**

**Entity Name:** CAPRICE OF ST. PETERSBURG BEACH CONDOMINIUM ASSOCIATION, INC.

**Current Principal Place of Business:**

6950 BEACH PLAZA  
SAINT PETERSBURG, FL 33706 US

**New Principal Place of Business:**

**Current Mailing Address:**

10681 GULF BLVD SUITE 207  
TREASURE ISLAND, FL 33706 US

**New Mailing Address:**

**FEI Number:** 06-1228649

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

LIBERTE MANAGEMENT  
10681 GULF BLVD SUITE 207  
TREASURE ISLAND, FL 33706 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: D  
Name: KARASSIK, BARBARA  
Address: 300 BEACH DR. NE APT. 1202  
City-St-Zip: ST. PETERSBURG, FL 33701

Title: DT  
Name: COOLBAUGH, NANCY  
Address: 531 WHITON RD R #2  
City-St-Zip: NESHANIC STATION, NJ 08853

Title: DS  
Name: RENNA, NICHOLAS  
Address: 40 13TH AVE  
City-St-Zip: HALIFAX, MA 02338

Title: DV  
Name: TAYLOR, ELSIE  
Address: 1263 CANFORD CRESENT  
City-St-Zip: MISSISSAUGA ONTARIO, CN L5J3M9

Title: P  
Name: MEDAJ, JAMES  
Address: 104 ELMHURST CIRCLE  
City-St-Zip: LIVERPOOL, NY 10390

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: ELSIE TAYLOR

DV

01/06/2011

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

\_\_\_\_\_  
Date