

# 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

**FILED**  
**Feb 22, 2007 8:00 am**  
**Secretary of State**

02-22-2007 90029 024 \*\*\*\*61.25

**DOCUMENT # N37862**

1. Entity Name

**CLUBHOUSE CONDOMINIUM ASSOCIATION OF CAPE CORAL, INC.**



Principal Place of Business

Mailing Address

C/O DENNIS CHRISTY  
3817 COUNTRY CLUB BLVD., #7  
CAPE CORAL FL 33904  
US

C/O DENNIS CHRISTY  
3817 COUNTRY CLUB BLVD., #7  
CAPE CORAL FL 33904  
US



2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

65-0201601

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75** Additional  
Fee Required

1st MOORE

CR2E037 (10/06)

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

CHRISTY, DENNIS  
3817 COUNTRY CLUB BLVD., #7  
CAPE CORAL FL 33904

Name

Street Address (P.O. Box Number is Not Acceptable)

City

**FL**

Zip Code

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

*Dennis H Christy*

(NOTE: Registered Agent signature required when reinstating)

2 12 07

DATE

**FILE NOW: FEE IS \$61.25**  
**Due By May 1, 2007**

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: TD ☐ Delete  
NAME: WHALLEY, FREDERICK  
STREET ADDRESS: 3817 COUNTRY CLUB 1  
CITY- ST- ZIP: CAPE CORAL FL 33904

TITLE: ☐ Change ☐ Addition  
NAME: ☐ Change ☐ Addition  
STREET ADDRESS: ☐ Change ☐ Addition  
CITY- ST- ZIP: ☐ Change ☐ Addition

TITLE: SD ☒ Delete  
NAME: PAYNE, JOHN  
STREET ADDRESS: 3817 CNTRY CLUB, # 5  
CITY- ST- ZIP: CAPE CORAL FL 33904

TITLE: ☐ Change ☐ Addition  
NAME: ☐ Change ☐ Addition  
STREET ADDRESS: ☐ Change ☐ Addition  
CITY- ST- ZIP: ☐ Change ☐ Addition

TITLE: PD ☐ Delete  
NAME: CHRISTY, DENNIS  
STREET ADDRESS: 3817 COUNTRY CLUB BLVD., #7  
CITY- ST- ZIP: CAPE CORAL FL 33904

TITLE: ☐ Change ☐ Addition  
NAME: ☐ Change ☐ Addition  
STREET ADDRESS: ☐ Change ☐ Addition  
CITY- ST- ZIP: ☐ Change ☐ Addition

TITLE: VD ☒ Delete  
NAME: GOVE, ROBERT  
STREET ADDRESS: 3817 COUNTRY CLUB, #2  
CITY- ST- ZIP: CAPE CORAL FL 33904

TITLE: VD ☐ Change ☒ Addition  
NAME: VINCENT LORI  
STREET ADDRESS: 3817 COUNTRY CLUB #1  
CITY- ST- ZIP: CAPE CORAL FL 33904

TITLE: ☐ Delete  
NAME: ☐ Delete  
STREET ADDRESS: ☐ Delete  
CITY- ST- ZIP: ☐ Delete

TITLE: ☐ Change ☐ Addition  
NAME: ☐ Change ☐ Addition  
STREET ADDRESS: ☐ Change ☐ Addition  
CITY- ST- ZIP: ☐ Change ☐ Addition

TITLE: ☐ Delete  
NAME: ☐ Delete  
STREET ADDRESS: ☐ Delete  
CITY- ST- ZIP: ☐ Delete

TITLE: ☐ Change ☐ Addition  
NAME: ☐ Change ☐ Addition  
STREET ADDRESS: ☐ Change ☐ Addition  
CITY- ST- ZIP: ☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, 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:

*Dennis H Christy*  
DENNIS H CHRISTY

Date

2 12 07 239 541 1077

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Daytime Phone #