## 2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N93000001381

FILED Apr 05, 2011 Secretary of State

Entity Name: CAPTAIN'S BAY SOUTH CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business: New Principal Place of Business:

C/O ALLIANT PROPERTY MANAGEMENT, LLC 6719 WINKLER RD. STE. 200 FT. MYERS, FL 33919 US

Current Mailing Address: New Mailing Address:

C/O ALLIANT PROPERTY MANAGEMENT, LLC 6719 WINKLER RD. STE. 200 FT. MYERS, FL 33919 US

FEI Number: 65-0422747 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

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

C/O ALLIANT PROPERTY MANAGEMENT, LLC 6719 WINKLER RD. STE. 200 FT. MYERS, FL 33919 US

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:**

Γitle: PD

Name: CRIST, MARIE

Address: 22724 ISLAND PINES WAY #201 City-St-Zip: FORT MYERS BEACH, FL 33931

Title: TD

Name: LEOTTA, ROY

Address: 22736 ISLAND PINES WAY #201 City-St-Zip: FORT MYERS BEACH, FL 33931

Title: SD

Name: MCMULLEN, LINDA

Address: 22700 ISLAND PINES WAY #402 City-St-Zip: FORT MYERS BEACH, FL 33931

Title: VP

Name: CLARK, JAMES

Address: 22700 ISLAND PINES WAY #503 City-St-Zip: FT. MYERS BEACH, FL 33931

Title:

Name: WAGNER, KARL

Address: 22748 ISLAND PINES WAY #502 City-St-Zip: FT. MYERS BEACH, FL 33931

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: MARIE CRIST PD 04/05/2011