

2019 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 741229

Entity Name: VILLA CAPRI ASSOCIATION, INC.**Current Principal Place of Business:**2828 JACKSON ST
FORT MYERS, FL 33901**Current Mailing Address:**1319 MIRAMAR ST
STE 101
CAPE CORAL, FL 33904**FEI Number:** 59-1556592**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**ZUNINO, PAOLA
C/O GPM INC
1319 MIRAMAR ST STE 101
CAPE CORAL, FL 33904 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**Officer/Director Detail :**

Title	SEC/TREAS
Name	CARCANAG, MARGE
Address	1319 MIRAMAR ST. STE 101
City-State-Zip:	CAPE CORAL FL 33904

Title	PRESIDENT
Name	NOVAK, KATHY
Address	2828 JACKSON ST I-6
City-State-Zip:	FORT MYERS FL 33901

Title	DIRECTOR
Name	DURANTINI, JOE
Address	1319 MIRAMAR ST STE 101
City-State-Zip:	CAPE CORAL FL 33904

Title	DIRECTOR
Name	SAYRE, WINNIE
Address	1319 MIRAMAR ST STE 101
City-State-Zip:	CAPE CORAL FL 33904

Title	VP
Name	ENGLEBERT, SUE
Address	1319 MIRAMAR ST STE 101
City-State-Zip:	CAPE CORAL FL 33904

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: NOVAK, KATHY

PRES

04/16/2019

Electronic Signature of Signing Officer/Director Detail_____
Date