

2015 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 742380

Entity Name: CAPRI J ASSOCIATION, INC.

Current Principal Place of Business:

4723 W. ATLANTIC AVENUE
SUITE A-19
DELRAY BEACH, FL 33445

Current Mailing Address:

4723 W. ATLANTIC AVENUE
SUITE A-19
DELRAY BEACH, FL 33445

FEI Number: 59-1858770

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

WILSON, DANNY
4723 W. ATLANTIC AVENUE
SUITE A-19
DELRAY BEACH, FL 33445 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 DIRECTOR
Name TAUBMAN, ONA
Address 454 CAPRI J
City-State-Zip: DELRAY BEACH FL 33484

Title T
Name SMITH, PHYLLIS
Address 433 CAPRI J
City-State-Zip: DELRAY BEACH FL 33484

Title PRESIDENT
Name ROGERS, SHEILA
Address 453 CAPRI J
City-State-Zip: DELRAY BEACH FL 33445

Title VP, SECRETARY
Name ZWICKEL, SUSAN
Address 436 CAPRI J
City-State-Zip: DELRAY BEACH FL 33484

Title DIRECTOR
Name FORMIA, OSVALDO
Address 438 CAPRI J
City-State-Zip: DELRAY BEACH FL 33484

Title DIRECTOR
Name FERNANDEZ, JORGE
Address 441 CAPRI J
City-State-Zip: DELRAY BEACH FL 33484

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: SHEILA ROGERS

PRESIDENT

01/06/2015

Electronic Signature of Signing Officer/Director Detail

Date