## 2016 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

**DOCUMENT# 742380** 

Entity Name: CAPRI J ASSOCIATION, INC.

**Current Principal Place of Business:** 

C/O A&N MANAGEMENT 902 CLINT MOORE RD #110 BOCA RATON, FL 33487

## **Current Mailing Address:**

C/O A&N MANAGEMENT 902 CLINT MOORE RD #110 BOCA RATON, FL 33487 US

FEI Number: 59-1858770 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

A&N MANAGEMENT C/O A&N MANAGEMENT 902 CLINT MOORE RD #110 BOCA RATON, FL 33487 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: NORMAN SILVERSTEIN 04/18/2016

Electronic Signature of Registered Agent Date

Officer/Director Detail:

Title T Title VI

Name SMITH, PHYLLIS Name DOMENECH, JULIAN

Address 433 CAPRI J Address 459 CAPRI J

City-State-Zip: DELRAY BEACH FL 33484 City-State-Zip: DELRAY BEACH FL 33484

Title DIRECTOR Title PRESIDENT

Name CATALA, VICTOR Name VACCARINO, CARL

Address 465 CAPRI J Address 460 CAPRI J

City-State-Zip: DELRAY BEACH FL 33484 City-State-Zip: DELRAY BEACH FL 33484

Title SECRETARY

Name FRANKENSTEIN, ELAINE

Address 457 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: CARL VACCARINO

Electronic Signature of Signing Officer/Director Detail

**PRES** 

04/18/2016 Date

FILED Apr 18, 2016

**Secretary of State** 

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