## 2025 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

**DOCUMENT# 742380** 

Entity Name: CAPRI J ASSOCIATION, INC.

**Current Principal Place of Business:** 

C/O REALMANAGE 11784 WEST SAMPLE ROAD CORAL SPRINGS, FL 33065

**Current Mailing Address:** 

C/O REALMANAGE PO BOX 803555 DALLAS, TX 75380 US

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

Name and Address of Current Registered Agent:

KRAVIT LAW, P.A. KRAVIT LAW, P.A. 1801 N MILITARY TRAIL SUITE 120 BOCA RATON, FL 33431 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: CORY B. KRAVIT 03/10/2025

> Date Electronic Signature of Registered Agent

Officer/Director Detail:

Title DIRECTOR Title **TREASURER** 

Name SMITH, PHYLLIS Name MULLER, MONICA

Address C/O REALMANAGE Address C/O REALMANAGE

11784 WEST SAMPLE ROAD 11784 WEST SAMPLE ROAD

City-State-Zip: CORAL SPRINGS FL 33065 City-State-Zip: CORAL SPRINGS FL 33065

Title **SECRETARY** Title **PRESIDENT** Name

Name SCHUYLER, ELLEN KOCH, TERRY

Address C/O REALMANAGE Address C/O REALMANAGE

11784 WEST SAMPLE ROAD 11784 WEST SAMPLE ROAD CORAL SPRINGS FL 33065 City-State-Zip: CORAL SPRINGS FL 33065

Title DIRECTOR

City-State-Zip:

SCHREIBER, CAROL Name

Address C/O REALMANAGE

11784 WEST SAMPLE ROAD

City-State-Zip: CORAL SPRINGS FL 33065

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.

03/10/2025 SIGNATURE: TERRY KOCH **PRESIDENT** 

**FILED** Mar 10, 2025

**Secretary of State** 

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