## **2013 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

**DOCUMENT# 754541** 

Entity Name: CAPRI LAGOONS CLUB CONDOMINIUM ASSOCIATION, INC.

FILED
Apr 09, 2013
Secretary of State
CC9449969161

## **Current Principal Place of Business:**

12500 CAPRI CIRCLE N. TREASURE ISLAND. FL 33706

# **Current Mailing Address:**

4585 140TH AVENUE N SUITE 1012 CLEARWATER, FL 33762 US

FEI Number: 59-2174859 Certificate of Status Desired: No

## Name and Address of Current Registered Agent:

COMMUNITY MANAGEMENT CONCEPTS, INC. 4585 140TH AVENUE N SUITE 1012 CLEARWATER, FL 33762 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 S Title I

Name MOSICK, SALLY Name CELLAMARE, TRISH

Address 12500 CAPRI CIRCLE N #301 Address 12500 CAPRI CIRCLE N #403
City-State-Zip: TREASURE ISLAND FL 33706 City-State-Zip: TREASURE ISLAND FL 33706

Title T

Name AUST, ANN

Address 12500 CAPRI CIRCLE # 401
City-State-Zip: TREASURE ISLAND FL 33706

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: TRISH CELLAMARE

Electronic Signature of Signing Officer/Director Detail

**PRESIDENT** 

04/09/2013