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

**DOCUMENT# 762317** 

Entity Name: CAPTAINS' QUARTERS OF ST. AUGUSTINE BEACH

CONDOMINIUM ASSOC., INC.

**Current Principal Place of Business:** 

1 DONDANVILLE RD.

SAINT AUGUSTINE, FL 32080

**Current Mailing Address:** 

1 DONDANVILLE RD.

SAINT AUGUSTINE, FL 32080 US

FEI Number: 59-2217514 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

AYERS, DORIS 1 DONDANVILLE RD. SAINT AUGUSTINE, FL 32080 US

SAINT AUGUSTINE, FL 32000 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

FILED Feb 05, 2013

**Secretary of State** 

CC5128776114

Officer/Director Detail:

Title PD Title VP

Name RENDALL, MARTHA Name ANDREWS, GRACE

Address 1 DONDANVILLE RD #205 Address 1 DONDANVILLE ROAD #203

City-State-Zip: SAINT AUGUSTINE FL 32080 City-State-Zip: ST AUGUSTINE FL 32080

Title TREASURER Title SECRETARY

Name TESTONI, MICHAEL Name MOBERLY, ROBERT SEC

Address 4869 PALM COAST PARKWAY SUITE 3 Address 1 DONDANVILLE RAOD #308

City-State-Zip: SAINT AUGUSTINE FL 32080 City-State-Zip: PALM COAST FL 32137

Title MAIN

THE MAIN

Name NADEAU, ROGER MAINT

SIGNATURE: MARTHA RENDALL

Address 143 BAHIA TRACE

City-State-Zip: SILVER SPRINGS, OCALA FL 34472

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.

Electronic Signature of Signing Officer/Director Detail

**PRESIDENT** 

02/05/2013

Date