

2022 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 769660

Entity Name: CAPE REGATTA CONDOMINIUM ASSOCIATION, INC.**Current Principal Place of Business:**C/O PROFESSIONAL REALTY
3501 DEL PRADO BLVD S SUITE 100
CAPE CORAL, FL 33914**Current Mailing Address:**P.O. BOX 100831
CAPE CORAL, FL 33910-0831 US**FEI Number:** 59-2410121**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**PROFESSIONAL REALTY
PROFESSIONAL REALTY
3501 DEL PRADO BLVD S SUITE 100
CAPE CORAL, FL 33914 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:** JOAN FOYE**04/28/2022**

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title PRESIDENT
Name TOTH, LARRY
Address C/O PROFESSIONAL REALTY
 3501 DEL PRADO BLVD S SUITE 100
City-State-Zip: CAPE CORAL FL 33914

Title VP
Name CONNIE, ANNETTE
Address C/O PROFESSIONAL REALTY
 3501 DEL PRADO BLVD S SUITE 100
City-State-Zip: CAPE CORAL FL 33914

Title DIRECTOR
Name VIETS, STANLEY
Address C/O PROFESSIONAL REALTY
 3501 DEL PRADO BLVD S SUITE 100
City-State-Zip: CAPE CORAL FL 33914

Title DIRECTOR
Name COLLETT, MARK
Address C/O PROFESSIONAL REALTY
 3501 DEL PRADO BLVD S SUITE 100
City-State-Zip: CAPE CORAL FL 33914

Title S
Name RAYMOND, SONIA
Address C/O PROFESSIONAL REALTY
 3501 DEL PRADO BLVD S SUITE 100
City-State-Zip: CAPE CORAL FL 33914

Title D
Name MONITTO, ANTHONY
Address C/O PROFESSIONAL REALTY
 3501 DEL PRADO BLVD S SUITE 100
City-State-Zip: CAPE CORAL FL 33914

Title TREASURER
Name LIGMANOSKI, GARRY
Address C/O PROFESSIONAL REALTY
 3501 DEL PRADO BLVD S SUITE 100
City-State-Zip: CAPE CORAL FL 33914

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: LARRY TOTH**PRESIDENT****04/28/2022**

Electronic Signature of Signing Officer/Director Detail

Date