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: NORMAN TAYLOR

Electronic Signature of Signing Officer/Director Detail

S GLEN City-State-Zip: LAKE CITY FL 32025 City-State-Zip: LAKE CITY FL 32025 Title D,S

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.

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TAYLOR, HELEN

City-State-Zip: LAKE CITY FL 32025

131 SW CAPTAINS GLEN

SIGNATURE:

Name

I

Address

	Electronic Signature of Registered Agent			
Officer/Director Detail :				
Title	D,P	Title	D, VP	
Name	TAYLOR, NORMAN	Name	KAEFER, DENNIS	
Address	131 SW CAPTAINS GLEN	Address	182 SW CAPTAINS	

Name and Address of Current Registered Agent:

131 SW CAPTAINS GLEN LAKE CITY, FL 32025 US

DOCUMENT# N04000011394

2016 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

Entity Name: CAPTAIN'S QUARTERS HOMEOWNER'S ASSOCIATION, INC.

Current Principal Place of Business:

131 SW CAPTAINS GLEN LAKE CITY, FL 32025

Current Mailing Address:

131 SW CAPTAINS GLEN LAKE CITY. FL 32025

FEI Number: 20-2807499

TAYLOR, NORMAN

FILED Mar 07, 2016 Secretary of State CC5168041203

Certificate of Status Desired: No

PRESIDENT

Date