

2017 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000000194

Entity Name: CAPRIANA CONDOMINIUM OWNERS ASSOCIATION, INC.

Current Principal Place of Business:

1425 OCEAN SHORE BLVD
ORMOND BEACH, FL 32176

Current Mailing Address:

P.O. BOX 4257
ORMOND BEACH, FL 32175-4257 US

FEI Number: 20-2221929

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

ALBANESE HOLLANDER, INC
1 RIDGE TRL
ORMOND BEACH, FL 32174 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: ADRIANA ALBANESE

03/07/2017

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title PRESIDENT
Name KIP, ERZINGER
Address PO BOX 4257
City-State-Zip: ORMOND BEACH FL 32175

Title VP
Name CHANDLER, JUDITH
Address PO BOX 4257
City-State-Zip: ORMOND BEACH FL 32175

Title SECRETARY, TREASURER
Name FRANCHINI, ROXANNE
Address PO BOX 4257
City-State-Zip: ORMOND BEACH FL 32175

Title DIRECTOR
Name BAUMGARTNER, WALTER
Address PO BOX 4257
City-State-Zip: ORMOND BEACH FL 32175

Title DIRECTOR
Name NATHANSON, IAN
Address P.O. BOX 4257
City-State-Zip: ORMOND BEACH FL 32175

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: ROXANNE FRANCHINI

SECRETARY

03/07/2017

Electronic Signature of Signing Officer/Director Detail

Date