

**2018 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N06404

**FILED**  
**Mar 14, 2018**  
**Secretary of State**  
**CC1227595297**

**Entity Name:** CAPISTRANO CONDOMINIUM OWNERS' ASSOCIATION, INC.

**Current Principal Place of Business:**

10221 EMERALD COAST PKWY WEST  
SUITE 5  
MIRAMAR BEACH, FL 32550

**Current Mailing Address:**

10221 EMERALD COAST PKWY WEST  
SUITE 5  
MIRAMAR BEACH, FL 32550 US

**FEI Number:** 59-3227980

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

GELDER, JAY  
10221 EMERALD COAST PKWY WEST  
SUITE 5  
MIRAMAR BEACH, FL 32550 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:** JAY GELDER

03/14/2018

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title SECRETARY  
Name HARPER, JODY  
Address 10221 EMERALD COAST PKWY WEST  
SUITE 5  
City-State-Zip: MIRAMAR BEACH FL 32550

Title PRESIDENT  
Name JASLOW, ALAN  
Address 10221 EMERALD COAST PKWY WEST  
SUITE 5  
City-State-Zip: MIRAMAR BEACH FL 32550

Title TREASURER  
Name CAVANAGH, JOAN  
Address 10221 EMERALD COAST PKWY WEST  
SUITE 5  
City-State-Zip: MIRAMAR BEACH FL 32550

Title VP  
Name COCHRAN, STAN  
Address 10221 EMERALD COAST PKWY WEST  
SUITE 5  
City-State-Zip: MIRAMAR BEACH FL 32550

Title DIRECTOR  
Name ASCENZO, , DAN  
Address 10221 EMERALD COAST PKWY WEST  
SUITE 5  
City-State-Zip: MIRAMAR BEACH FL 32550

*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:** JODY HARPER

SECRETARY

03/14/2018

Electronic Signature of Signing Officer/Director Detail

Date