

2021 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N13000002227

FILED
Feb 15, 2021
Secretary of State
6136610954CC

Entity Name: CAPISTARA HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:

3900 WOODLAKE BLVD
SUITE 309
LAKE WORTH, FL 33463

Current Mailing Address:

3900 WOODLAKE BLVD
SUITE 309
LAKE WORTH, FL 33463 US

FEI Number: 90-0950589

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

BACKER ABOUD POLIAKOFF & FOELSTER
400 S. DIXIE HIGHWAY
SUITE 420
BOCA RATON, FL 33432 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: KEITH F. BACKER

02/15/2021

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title PRESIDENT
Name ENGIMANN, JAMES DONALD
Address 3900 WOODLAKE BLVD
 SUITE 309
City-State-Zip: LAKE WORTH FL 33463

Title VP
Name VERSAGGI, VIRGIL THOMAS
Address 3900 WOODLAKE BLVD
 SUITE 309
City-State-Zip: LAKE WORTH FL 33463

Title DIRECTOR
Name DEGENNARO, ROBERT EDWARD
Address 3900 WOODLAKE BLVD
 SUITE 309
City-State-Zip: LAKE WORTH FL 33463

Title SECRETARY
Name SHOCK, WILLIAM
Address 3900 WOODLAKE BLVD.
 SUITE 309
City-State-Zip: LAKE WORTH FL 33463

Title TREASURER
Name KNOWLES, CRAIG
Address 3900 WOODLAKE BLVD.
 SUITE 309
City-State-Zip: LAKE WORTH FL 33463

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: JAMES ENGIMANN

PRES

02/15/2021

Electronic Signature of Signing Officer/Director Detail

Date