## **2020 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N13340

Entity Name: VILLA CAPRI HOMEOWNERS' ASSOCIATION, INC.

FILED
May 21, 2020
Secretary of State
7713864980CC

**Current Principal Place of Business:** 

1000 PINE HOLLOW POINT ALTAMONTE SPRINGS. FL 32714

**Current Mailing Address:** 

1000 PINE HOLLOW POINT

ALTAMONTE SPRINGS. FL 32714 US

FEI Number: 59-2874642 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

JORDAN, BRETT M 1000 PINE HOLLOW POINT ALTAMONTE SPRINGS, FL 32714 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: BRETT M JORDAN 05/21/2020

Electronic Signature of Registered Agent Date

Officer/Director Detail:

Title PRESIDENT Title VF

NameLAREAU, STEPHENNamePEREIRA NUNES, GABRIELAAddress1000 PINE HOLLOW POINTAddress1000 PINE HOLLOW POINT

City-State-Zip: ALTAMONTE SPRINGS FL 32714 City-State-Zip: ALTAMONTE SPRINGS FL 32714

Title SECRETARY Title DIRECTOR

Name BERTRAM, PATTY Name RIVIERE, GLYNN

Address 1000 PINE HOLLOW POINT Address 1000 PINE HOLLOW POINT

City-State-Zip: ALTAMONTE SPRINGS FL 32714 City-State-Zip: ALTAMONTE SPRINGS FL 32714

Title DIRECTOR Title DIRECTOR

Name ECHAVARRIA, JULIAN Name GABLE, LINDA

Address 1000 PINE HOLLOW POINT Address 1000 PINE HOLLOW POINT

City-State-Zip: ALTAMONTE SPRINGS FL 32714 City-State-Zip: ALTAMONTE SPRINGS FL 32714

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: STEPHEN LAREAU PRESIDENT 05/21/2020