

2019 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N38795

Entity Name: NORTH CAPE INDUSTRIAL PARK ASSOCIATION, INC.**Current Principal Place of Business:**2534 NE 9TH AVENUE
CAPE CORAL, FL 33909**Current Mailing Address:**PO BOX 101725
CAPE CORAL, FL 33910**FEI Number:** 65-6342224**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**LUSK, LISA M
202 DEL PRADO BLVD
CAPE CORAL, FL 33990 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:**_____
Electronic Signature of Registered Agent_____
Date**Officer/Director Detail :**

Title	DP
Name	SIMONE, NICK
Address	2525 NE 9TH AVE
City-State-Zip:	CAPE CORAL FL 33909

Title	DIRECTOR/SECRETARY
Name	BARTON, DAVID A
Address	2534, NE 9TH AVE 1
City-State-Zip:	CAPE CORAL FL 33909

Title	DIRECTOR
Name	SHEPARD, RICHARD
Address	2602, NE 9TH AVENUE
City-State-Zip:	CAPE CORAL FL 33909

Title	MR
Name	MOSSER, FRANCIS
Address	2505, NE 9TH AVENUE
City-State-Zip:	CAPE CORAL FL 33910

Title	DT
Name	GYURE, DOUGLAS
Address	2631 NE 9TH AVE.
City-State-Zip:	CAPE CORAL FL 33909

Title	DIRECTOR
Name	OPSAHL, WILLIAM
Address	889, NE 27TH LANE,
City-State-Zip:	CAPE CORAL FL 33909

Title	DIRECTPR
Name	WILCOX, PAUL
Address	2414, ANDALUSIA BLVD.
City-State-Zip:	CAPE CORAL FL 33910

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: DAVID A. BARTON**DIRECTOR/SECRETARY** 03/27/2019_____
Electronic Signature of Signing Officer/Director Detail_____
Date