

2024 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N95000003721

Entity Name: CAPE VILLAGE CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

C/O RIVER ASSOCIATION MANAGEMENT
PO BOX 568
CAPE CORAL, FL 33991

Current Mailing Address:

C/O RIVER ASSOCIATION MANAGEMENT
PO BOX 568
CAPE CORAL, FL 33991 US

FEI Number: 20-3364855

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

RIVER ASSOCIATION MANAGEMENT
C/O RIVER ASSOCIATION MANAGEMENT
3444 MARINATOWN LN SUITE 17
N FORT MYERS, FL 33903 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: CYNTHIA DIETZ

04/10/2024

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title PRESIDENT
Name SHERER, JACKSON SR.
Address C/O RIVER ASSOCIATION
 MANAGEMENT
 PO BOX 568
City-State-Zip: CAPE CORAL FL 33991

Title SECRETARY, TREASURER
Name SHERER, JANE
Address C/O RIVER ASSOCIATION
 MANAGEMENT
 PO BOX 568
City-State-Zip: CAPE CORAL FL 33991

Title VP
Name FIRRINCEILI, DENISE
Address C/O RIVER ASSOCIATION
 MANAGEMENT
 PO BOX 568
City-State-Zip: CAPE CORAL FL 33991

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: JACKSON SHERER, SR.

PRESIDENT

04/10/2024

Electronic Signature of Signing Officer/Director Detail

Date