

2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 710065

FILED
Apr 05, 2010
Secretary of State

Entity Name: GARDEN MANOR OF NAPLES, INC.

Current Principal Place of Business:

C/O ABILITY MANAGEMENT, INC
6736 LOANE OAK BLVD
NAPLES, FL 34109

New Principal Place of Business:

Current Mailing Address:

C/O ABILITY MANAGEMENT, INC
6736 LOANE OAK BLVD
NAPLES, FL 34109

New Mailing Address:

FEI Number: 59-1583708 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

ABILITY MANAGEMENT, INC
6736 LONE OAK BLVD
NAPLES, FL 34109 US

Name and Address of New Registered Agent:

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

OFFICERS AND DIRECTORS:

Title: VPS
Name: PRINCE, RICHARD
Address: 213-A 8TH AVE S
City-St-Zip: NAPLES, FL 34102

Title: P
Name: MAYER, LINDA
Address: 215 B 8TH AVE S
City-St-Zip: NAPLES, FL 34102

Title: T
Name: FRENCH, JOSEPH
Address: 203-A 8TH AVE SOUTH
City-St-Zip: NAPLES, FL 34102

Title: D
Name: BALLARD, BETTE
Address: 215A 8TH AVE
City-St-Zip: NAPLES, FL 34102

Title: D
Name: BICKELMANN, BRUCE
Address: 205-A 8TH AVE S
City-St-Zip: NAPLES, FL 34102

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: DENNIS F LIVELY

MGR

04/05/2010

Electronic Signature of Signing Officer or Director

Date