

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 26, 2007 8:00 am
Secretary of State

03-26-2007 90057 014 ****61.25

DOCUMENT # 724554			
1. Entity Name MONTEGO MANOR, INC.			
Principal Place of Business 187 FOREST LAKES BLVD NAPLES, FL 34105 US		Mailing Address 187 FOREST LAKES BLVD NAPLES, FL 34105 US	
2. Principal Place of Business - No P.O. Box #		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country
6. Name and Address of Current Registered Agent		7. Name and Address of New Registered Agent	
GRACEY, ROBERT 187 FOREST LAKES BLVD. NAPLES, FL 34105		Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code	
8. 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. I am familiar with, and accept the obligations of registered agent.			
SIGNATURE _____ Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE			
Filing Fee is \$61.25 Due by May 1, 2007		9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees	
		Make check payable to Florida Department of State	
10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD JOHNSON, RON 215 CYPRESS WAY E #A1 NAPLES, FL 34110 ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D ORLEA, RICHARD 215 CYPRESS WAY EAST # B5 NAPLES, FL 34110 ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	TREAS ☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D WARD, CHARLES 215 CYPRESS WAY E D1 NAPLES, FL 34110 ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	VICE - PRES. ☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D HALL, DAVID 215 CYPRESS WAY E #B2 NAPLES, FL 34110 ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	2nd VICE - PRES. ☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	AST GRACEY, ROBERT 187 FOREST LAKES BLVD NAPLES, FL 34105 ☒ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D CARRAWAY, JOANN 215 CYPRESS WAY E A2 NAPLES, FL 34110 ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	SEC ☒ Change ☐ Addition



02122007 Chg-NP CR2E037 (12/06)

4. FEI Number
59-1468064 Applied For
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75** Additional
Fee Required

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

John S. Green - Manager
2/28/2007 239-434-2077

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR