

# 2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N20385

FILED  
Jan 07, 2005  
Secretary of State

Entity Name: COUNTRYSIDE VERANDAS CONDOMINIUM ASSOCIATION, INC.

**Current Principal Place of Business:**

C/O NEWELL PROPERTY MGMT  
5435 JAEGER RD. #4  
NAPLES, FL 34109

**New Principal Place of Business:**

**Current Mailing Address:**

C/O NEWELL PROPERTY MGMT  
5435 JAEGER RD. #4  
NAPLES, FL 34109

**New Mailing Address:**

FEI Number: 59-2832146      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

NEWELL, WILLIAM A  
5435 JAEGER ROAD #4  
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: PD ( ) Delete  
Name: GLARNER, FRED  
Address: 500 VERANDA WAY #C204  
City-St-Zip: NAPLES, FL 34104

Title: TD ( ) Delete  
Name: MERRIFIELD, JAMES  
Address: 508 VERANDA WAY #C203  
City-St-Zip: NAPLES, FL 34104

Title: D ( ) Delete  
Name: DAVIS, BOB  
Address: 504 VERANDA WAY #B201  
City-St-Zip: NAPLES, FL 34104

Title: D ( ) Delete  
Name: BELLEROSE, BOB  
Address: 508 VERANDA WAY #C201  
City-St-Zip: NAPLES, FL 34104

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: VD (X) Change ( ) Addition  
Name: DAVIS, BOB  
Address: 504 VERANDA WAY #B201  
City-St-Zip: NAPLES, FL 34104

Title: SD (X) Change ( ) Addition  
Name: MURHPY, JOE  
Address: 508 VERANDA WAY #B201  
City-St-Zip: NAPLES, FL 34104

Title: TD (X) Change ( ) Addition  
Name: MERRIFIELD, JAMES  
Address: 508 VERANDA WAY #C203  
City-St-Zip: NAPLES, FL 34104

Title: D ( ) Change (X) Addition  
Name: BELLEROSE, BOB  
Address: 508 VERANDA WAY #C201  
City-St-Zip: NAPLES, FL 34104

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: FRED GLARNER

PD

01/07/2005

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date