# 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: RICHARD PRINCE

Electronic Signature of Signing Officer/Director Detail

PRESIDENT

04/07/2014

Date

## 2014 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

#### DOCUMENT# 710065

Entity Name: GARDEN MANOR OF NAPLES, INC.

#### Current Principal Place of Business:

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

### **Current Mailing Address:**

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

### FEI Number: 59-1583708

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

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

### Officer/Director Detail :

Title	PRESIDENT	Title	DIRECTOR
Name	PRINCE, RICHARD	Name	MAYER, LINDA
Address	213A 8TH AVE, S	Address	215 A 8TH AVE, S
City-State-Zip:	NAPLES FL 34102	City-State-Zip:	NAPLES FL 34102
Title	VP	Title	S
Name	FRENCH, JOSEPH	Name	BECKMAN, LOVETTA
Address	335 8TH AVE, SOUTH	Address	211B 8TH AVE, S
City-State-Zip:	NAPLES FL 34102	City-State-Zip:	NAPLES FL 34102
Title	т		
Name	VAN ALSTINE, JAMES		
Address	217B 8TH AVE, S		
City-State-Zip:	NAPLES FL 34102		

Certificate of Status Desired: No

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Date