## 2014 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 721337

Entity Name: COCOHATCHEE MANOR, INC.

## **Current Principal Place of Business:**

187 FOREST LAKES BLVD. NAPLES, FL 34105

## **Current Mailing Address:**

187 FOREST LAKES BLVD NAPLES, FL 34105

# FEI Number: 59-2170043

## Name and Address of Current Registered Agent:

GRACEY, ROBERT TSR. 187 FOREST LAKES BLVD NAPLES, FL 34105 US

Date

Certificate of Status Desired: No

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		DVP	Title	DS
Name		TURNER, GREGORY	Name	SMITH, SHELBY
Addres	S	200 VINTAGE CIRCLE APT. 502	Address	653 PALM VIEW DRIVE
City-Sta	ate-Zip:	NAPLES FL 34119	City-State-Zip:	NAPLES FL 34110
Title		D	Title	TREA
		-		
Name		SKODA, SANDRA	Name	GRACEY, ROBERT
Addres	s	681 PALM VIEW DRIVE	Address	187 FOREST LAKES BLVD
City-Sta	ate-Zip:	NAPLES FL 34110	City-State-Zip:	NAPLES FL 34105
Title		D	Title	PRESIDENT
Name		GUILLEN, MIGUEL	Name	GUIDIDAS, ANN
Addres	S	200 VINTAGE CIRCLE APT. 502	Address	1550 13TH AVE. NO
City-Sta	ate-Zip:	NAPLES FL 34119	City-State-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: ANN GUIDIDAS

PRESIDENT

04/17/2014

Electronic Signature of Signing Officer/Director Detail

Date