

**2016 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**

**Certificate of Status Desired: No**

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

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

Date

**Officer/Director Detail :**

Title TREA  
Name GRACEY, ROBERT  
Address 187 FOREST LAKES BLVD  
City-State-Zip: NAPLES FL 34105

Title PRESIDENT  
Name VENTRY, DEIRDRE  
Address 709 PALM VIEW DRIVE  
City-State-Zip: NAPLES FL 34110

Title VP  
Name SMITH, SUE  
Address 653 PALM VIEW DRIVE  
City-State-Zip: NAPLES FL 34110

Title DIRECTOR  
Name ANDREWS, ELYSIA  
Address 721 PALM VIEW DR.  
City-State-Zip: NAPLES FL 34110

Title DIRECTOR  
Name CARLSON, INGEBORG  
Address 769 PALM VIEW DR.  
City-State-Zip: NAPLES FL 34110

Title DIRECTOR  
Name TIM, DONALD A  
Address 725 PALM VIEW DR.  
City-State-Zip: NAPLES FL 34110

*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: DEIRDRE VENTRY**

**PRESIDENT**

**04/09/2016**

Electronic Signature of Signing Officer/Director Detail

Date