

2014 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N33838

Entity Name: CROWN COLONY VILLAGE ASSOCIATION, INC.**Current Principal Place of Business:**C/O ABILITY MANAGEMENT
6736 LONE OAK BLVD.
NAPLES, FL 34109**Current Mailing Address:**C/O ABILITY MANAGEMENT
6736 LONE OAK BLVD.
NAPLES, FL 34109 US**FEI Number:** 65-0139484**Certificate of Status Desired:** No**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

Date

Officer/Director Detail :

Title P
Name VLASHO, PATRICIA
Address 6525 CROWN COLONY PLACE, #101
City-State-Zip: NAPLES FL 34108

Title DIRECTOR
Name BELFORE, JEFF
Address 6597 NICHOLAS BLVD, #1105
City-State-Zip: NAPLES FL 34108

Title D
Name LAIZZO, JOHN
Address 6573 MARISSA LOOP
City-State-Zip: NAPLES FL 34108

Title VP
Name MULLARKEY, ROGER
Address 6585 NICHOLAS BLVD
City-State-Zip: NAPLES FL 34108

Title TREASURER
Name BOZZACCO, RAY
Address 6585 NICHOLAS BLVD, #1103
City-State-Zip: NAPLES FL 34108

Title D
Name DUFFY, PAUL
Address 6597 NICHOLAS BLVD, #902
City-State-Zip: NAPLES FL 34108

Title D
Name GASCOIGNE, SUSAN
Address 6559 MARISSA LOOP
City-State-Zip: NAPLES FL 34108

Title S
Name VESPO, JOE
Address 6573 MARISSA LOOP
#1604
City-State-Zip: NAPLES FL 34108

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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: PATRICIA VLASHO**PRESIDENT****04/17/2014**

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title	D
Name	PKE, CHARLES
Address	6549 MARISSA LOOP #16
City-State-Zip:	NAPLES FL 34108