

2025 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N94000002815

Entity Name: FALCON RIDGE NEIGHBORHOOD ASSOCIATION, INC.

Current Principal Place of Business:

57 HERITAGE WAY
NAPLES, FL 34110

Current Mailing Address:

P. O. BOX 110207
NAPLES, FL 34108 US

FEI Number: 65-0576901

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

THE MURRELL LAW FIRM, P.A.
1044 CASTELLO DRIVE, SUITE 106
NAPLES, FL 34103 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: ROBERT E. MURRELL

03/09/2025

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title PRESIDENT
Name SCHOFIELD, BRIAN
Address 57 HERITAGE WAY
City-State-Zip: NAPLES FL 34110

Title TREASURER
Name PETERS, ELAINE
Address 48 HERITAGE WAY
City-State-Zip: NAPLES FL 34110

Title VP
Name COHEN, BRIAN
Address 3319 TAMIAMI TR. E
City-State-Zip: NAPLES FL 34112

Title SECRETARY
Name KEREKES, ERIKA
Address 22HERITAGE WAY
City-State-Zip: NAPLES FL 34110

Title DIRECTOR
Name CAVNESS, SUSAN
Address 58 HERITAGE WAY
City-State-Zip: NAPLES FL 34110

Title DIRECTOR
Name KEREKES, JOSHUA
Address 22 HERITAGE WAY
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: BRIAN SCHOFIELD

PRESIDENT

03/09/2025

Electronic Signature of Signing Officer/Director Detail

Date