

2014 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P99000093872

Entity Name: NATUREGLADES RESORT, INC.**Current Principal Place of Business:**4550 TILTON CT.
FT. MYERS, FL 33907**Current Mailing Address:**4550 TILTON CT.
FT. MYERS, FL 33907**FEI Number:** 65-0959938**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**CONLYN, ANDREW
4550 TILTON CT.
FT. MYERS, FL 33907 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	HITZEMAN, RUSSELL L
Address	21008 SUNPOINT WAY UNIT 204
City-State-Zip:	LUTZ FL 33558

Title	S
Name	LARREAU, SUE
Address	21509 GLORY RD
City-State-Zip:	LUTZ FL 33549

Title	T
Name	HOTALING, BETTY ANNE
Address	2016 LINDA LANE
City-State-Zip:	LUTZ FL 33558

Title	V
Name	CONLYN, ANDREW
Address	4550 TILTON CT
City-State-Zip:	FORT MYERS FL 33907

Title	VF
Name	TALBOTT, RALPH
Address	13 TURTLE BACK TRAIL
City-State-Zip:	PONTE VEDRA BEACH FL 32082

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 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: RUSSELL L HITZEMAN

P

02/04/2014

Electronic Signature of Signing Officer/Director Detail_____
Date