

**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

**FILED**  
**Feb 04, 2014**  
**Secretary of State**  
**CC4853335147**

**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