

2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 719977

FILED
Jan 03, 2011
Secretary of State

Entity Name: COCOHATCHEE VILLAS, INC.

Current Principal Place of Business:

682 PALM VIEW DRIVE
NAPLES, FL 34110 US

New Principal Place of Business:

Current Mailing Address:

C/O KMA COMPANY
PO BOX 111802
NAPLES, FL 34108 US

New Mailing Address:

C/O HERB SOLOMON @ KMA COMPANY
PO BOX 111802
NAPLES, FL 34108 US

FEI Number: 59-1617591

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SOLOMON, HERB MRG
9844 LUNA CIRCLE
#D103
NAPLES, FL 34109 US

Name and Address of New Registered Agent:

STEVE, ADAMCZYK ATTY.
8950 FONTANA DEL SOL WAY
SUITE 100
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: STEVE ADAMCZYK

01/03/2011

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: D
Name: WIELMS, GENE
Address: 626 PALM VIEW DR.
City-St-Zip: NAPLES, FL 34110

Title: P
Name: LEBIN, CARLA
Address: 682 PALM VIEW DRIVE
City-St-Zip: NAPLES, FL 34110

Title: D
Name: SCOTT, BILL
Address: 167 CROWN DR
City-St-Zip: NAPLES, FL 34110

Title: D
Name: GIL, ELIDA
Address: 624 PALM VIEW DRIVE
City-St-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: HERB SOLOMON

MGR

01/03/2011

Electronic Signature of Signing Officer or Director

Date