


2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

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FILED
Apr 05, 2007 8:00 am
Secretary of State

03-12-2007 90088 042 ****61.25

DOCUMENT # 721246 1. Entity Name THE GLADES COUNTRY CLUB APTS. ASSOCIATION, INC.	
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Principal Place of Business 174 TERYL ROAD NAPLES, FL 34112 US	Mailing Address 174 TERYL ROAD NAPLES, FL 34112 US
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01292007 No Chg-NP CR2E037 (4/06)

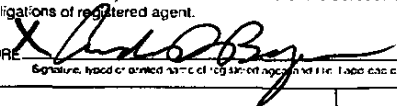
4. FEI Number 59-2310817	<input type="checkbox"/> Applied For <input checked="" type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent CASSIO JOHN 174 TERYL RD NAPLES, FL 34112	AUDIE BULGARIC
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**DO NOT WRITE
IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE: 	DATE: 4-3-07
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**Filing Fee is \$61.25
Due by May 1, 2007**

9. Election Campaign Financing
Trust Fund Contribution. ☐ **\$5.00 May Be Added to Fees**

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD GEHRKE, THOMAS 581 TERYL ROAD # 1 NAPLES, FL 34112
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD DENISE JOHN GEORGE WESLEY 125 PENNY LN #67 195 HARRISON RD. #2 NAPLES, FL 34112
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD HITENCOCK, CHARLES TED CLANCY 464 TERYL RD #1 262 CANDY LN #4 NAPLES, FL 34112
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD ADELSTEIN, CINDY NANCY PAULY SHIN 239 PALMER #1 255 MEMORY LN. #1 NAPLES, FL 34112
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 149, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: TED CLANCY SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR	3/22/07 (239) 774-6899 DAY PHONE
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