

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 23, 2007 8:00 am
Secretary of State

04-23-2007 90259 023 ****61.25

DOCUMENT # N23374 1. Entity Name CANDLEWOOD HOMEOWNERS ASSOCIATION, INC.					
Principal Place of Business PO BOX 20294 BRADENTON, FL 34205 34204			Mailing Address PO BOX 20294 BRADENTON, FL 34205 34204		
2. Principal Place of Business - No P.O. Box # 		3. Mailing Address 			
Suite, Apt. #, etc. 		Suite, Apt. #, etc. 			
City & State 		City & State 		4. FEI Number 59-2474423	
Zip 34204		Country 		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent PARRISH, JAMES 4906 29TH LN EAST BRADENTON, FL 34203				7. Name and Address of New Registered Agent Name GLORIANNE FLINT Street Address (P.O. Box Number is Not Acceptable) 4417-29TH LANE EAST City BRADENTON, FL FL Zip Code 34203	
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 <i>[Signature]</i> Glorianne Flint 4/16/07 <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>					
Filing Fee is \$61.25 Due by May 1, 2007		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees		Make check payable to Florida Department of State	
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE PD NAME PARRISH, JAMES STREET ADDRESS 4906 29TH LN EAST CITY-ST-ZIP BRADENTON, FL 34203	<input checked="" type="checkbox"/> Delete		TITLE PD NAME GLORIANNE FLINT STREET ADDRESS 4417-29TH LANE EAST CITY-ST-ZIP BRADENTON, FL 34203	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE DT NAME WETTER, DENNIS STREET ADDRESS 4910-29TH LANE EAST CITY-ST-ZIP BRADENTON, FL 34203	<input checked="" type="checkbox"/> Delete		TITLE DT NAME CAROL KARR STREET ADDRESS 4963-28TH COURT EAST CITY-ST-ZIP BRADENTON, FL 34203	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE DS NAME MORLEY, DOUGLAS STREET ADDRESS 2677 48TH WAY EAST CITY-ST-ZIP BRADENTON, FL 34203	<input checked="" type="checkbox"/> Delete		TITLE DS NAME MORLEY, DOUGLAS STREET ADDRESS 4963-28TH COURT EAST CITY-ST-ZIP BRADENTON, FL 34203	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE D2V NAME KARR, CAROL STREET ADDRESS 4963 28TH CT EAST CITY-ST-ZIP BRADENTON, FL 34203	<input checked="" type="checkbox"/> Delete		TITLE D2V NAME BRENDA HENRY STREET ADDRESS 2895-48TH WAY EAST CITY-ST-ZIP BRADENTON, FL 34203	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE D1V NAME CAPESTANY, MARIA STREET ADDRESS 4909 29TH LN EAST CITY-ST-ZIP BRADENTON, FL 34203	<input checked="" type="checkbox"/> Delete		TITLE D1V NAME GAIL McGRATH STREET ADDRESS 2973-48TH WAY EAST CITY-ST-ZIP BRADENTON, FL 34203	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP 	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP 	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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: <i>[Signature]</i> DARRAS MORLEY 941 751 6047 <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #</small>					