

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N24600

FILED
Jan 07, 2005
Secretary of State

Entity Name: COUNTRY MANOR COMMONS ASSOCIATION, INC.

Current Principal Place of Business:

% NEWELL PROPERTY MGMT
5435 JAEGER RD #4
NAPLES, FL 34109

New Principal Place of Business:

Current Mailing Address:

% NEWELL PROPERTY MGMT
5435 JAEGER RD #4
NAPLES, FL 34109

New Mailing Address:

FEI Number: 65-0070295

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

NEWELL, WILLIAM
5435 JAEGER RD #4
NAPLES, FL 34109 US

Name and Address of New Registered Agent:

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

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: POWELL, HARRY
Address: 7200 COVENTRY CT #107
City-St-Zip: NAPLES, FL 34104

Title: VD () Delete
Name: BECK, ED
Address: 7200 COVENTRY CT #330
City-St-Zip: NAPLES, FL 34104

Title: SD () Delete
Name: JACKSON, ROBERT
Address: 7340 COVENTRY CT #804
City-St-Zip: NAPLES, FL 34104

Title: D () Delete
Name: BLAKE, ROBERT
Address: 7240 COVENTRY CT #318
City-St-Zip: NAPLES, FL 34104

Title: D () Delete
Name: KUDELSKI, RICHARD
Address: 7220 COVEBTRY CT #222
City-St-Zip: NAPLES, FL 34104

Title: D () Delete
Name: CLARKSON, WILLIAM
Address: 7260 COVENTRY CT #421
City-St-Zip: NAPLES, FL 34104

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: SD (X) Change () Addition
Name: GRAPENGETER, JAMES
Address: 7340 COVENTRY COURT #810
City-St-Zip: NAPLES, FL 34104

Title: TD (X) Change () Addition
Name: BLAKE, ROBERT
Address: 7240 COVENTRY CT #318
City-St-Zip: NAPLES, FL 34104

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: HARY POWELL

PD

01/07/2005

Electronic Signature of Signing Officer or Director

Date