

# 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N25405

FILED  
Mar 08, 2007  
Secretary of State

**Entity Name:** COUNTRY MANOR CONDOMINIUM TWO ASSOCIATION, INC.

**Current Principal Place of Business:**

C/O NEWELL PROPERTY MGMT  
5435 JAEGER ROAD #4  
NAPLES, FL 34109

**New Principal Place of Business:**

**Current Mailing Address:**

C/O NEWELL PROPERTY MGMT  
5435 JAEGER ROAD #4  
NAPLES, FL 34109

**New Mailing Address:**

**FEI Number:** 65-0070301

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

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

**Name and Address of New Registered Agent:**

NEWELL, WILLIAM  
5435 JAEGER RD #4  
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: WILLIAM NEWELL AGENT

03/08/2007

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

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

Title: VD ( ) Delete  
Name: RASMUSSEN, JACK  
Address: 7220 COVENTRY COURT #204  
City-St-Zip: NAPLES, FL 34104

Title: VD ( ) Delete  
Name: ROBERTS, ROSANNE  
Address: 7220 COVENTRY COURT #205  
City-St-Zip: NAPLES, FL 34104

Title: STD ( ) Delete  
Name: KUNOW, RON  
Address: 7220 COVENTRY COURT #223  
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: ( ) 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 Chapter 119, 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: RICHARD KUDELSKI

PD

03/08/2007

Electronic Signature of Signing Officer or Director

Date