

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N29222

FILED
Jan 16, 2009
Secretary of State

Entity Name: COUNTRY HOLLOW ONE ASSOCIATION, INC.

Current Principal Place of Business:

5435 JAEGER RD. #4
NAPLES, FL 34109 US

New Principal Place of Business:

Current Mailing Address:

5435 JAEGER RD. #4
NAPLES, FL 34109 US

New Mailing Address:

FEI Number: 65-0083510

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

NEWELL, WILLIAM
5435 JAEGER ROAD #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: LANE, JACK
Address: 455 COUNTRY HOLLOW CT #B106
City-St-Zip: NAPLES, FL 34104

Title: VD () Delete
Name: NOSCHES, JOE
Address: 433 COUNTRY HOLLOW CT #C201
City-St-Zip: NAPLES, FL 34104

Title: SD () Delete
Name: HUGHES, DON
Address: 445 COUNTRY HOLLOW CT #B103
City-St-Zip: NAPLES, FL 34104

Title: D () Delete
Name: HEBSHIE, RONALD
Address: 457 COUNTRY HOLLOW COURT #A101
City-St-Zip: NAPLES, FL 34104

Title: TD () Delete
Name: LEYNE, THOMAS
Address: 457 COUNTRY HOLLOW COURT #B103
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: ERB, ROBERT
Address: 445 COUNTRY HOLLOW CT #B205
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 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: JACK LANE

PD

01/16/2009

Electronic Signature of Signing Officer or Director

Date