2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N31744

FILED Jan 19, 2009 Secretary of State

Entity Name: COUNTRY MANOR CONDOMINIUM FIVE ASSOCIATION, INC.

Littly Nan	ie. COONTR	REMINIOR CONDOMINIONEES	/ E A33001/	KTION, IIV	NC.		
Current Principal Place of Business:				New Principal Place of Business:			
% NEWELL PROPERTY MANAGEMENT 5435 JAEGER RD., #4 NAPLES, FL 34109				% PARAMOUNT PROPERTY MANAGEMENT OF NAPLES 495 19TH STREET SW NAPLES, FL 34117			
Current Mailing Address:				New Mailing Address:			
	ER RD., #4	MANAGEMENT	495		STREET SW	RTY MANAGEN	IENT OF NAPLES
FEI Number:	65-0125627	FEI Number Applied For ()	FEI Number	Not Applie	cable ()	Certificate of Stat	us Desired ()
Name and	Address of (Current Registered Agent:	Na	me and	Address of N	lew Registered	Agent:
NEWELL, WILLIAM 5435 JAEGER RD., #4 NAPLES, FL 34109 US				LABUZIENSKI, CHRISTINE 495 19TH STREET SW NAPLES, FL 34117 US			
The above in the State		submits this statement for the po	urpose of cha	anging its	s registered o	ffice or registere	d agent, or both,
SIGNATURE: CHRISTINE LABUZIENSKI						01/19/200	9
	Electro	nic Signature of Registered Age	nt			Date	
OFFICERS AND DIRECTORS:				ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:			
Title: Name: Address: City-St-Zip:	PRATT, LUTHE	RY COURT #518			()	Change () Addition	ח
Title: Name: Address: City-St-Zip:	MANGINO, JOI	RY COURT #530			()	Change () Addition	י
Title: Name: Address: City-St-Zip:	GUERRA, SAL) Delete RY COURT #524 4104			()	Change () Addition	י
Title: Name: Address: City-St-Zip:	MURRAY, PHIL	RY COURT #519			()	Change () Addition	ו
Title: Name: Address: City-St-Zip:	EVANSKI, ROS	RY COURT #521			MACKENZIE, D	RY COURT #509	n

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: CHRISTINE LABUZIENSKI RA 01/19/2009