

2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N39356

FILED
Apr 16, 2012
Secretary of State

Entity Name: CANDLEWOOD RESIDENT'S ASSOCIATION, INC.

Current Principal Place of Business:

425 CANDLEWOOD LANE
NAPLES, FL 34110 US

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 110028
NAPLES, FL 34110 US

New Mailing Address:

P.O. BOX 110028
NAPLES, FL 34108 US

FEI Number: 65-0223660

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LENNERTZ, SUSIE
425 CANDLEWOOD LANE
NAPLES, FL 34110 US

Name and Address of New Registered Agent:

LENNERTZ, SUSIE S
425 CANDLEWOOD LANE
NAPLES, FL 34110 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: SUSIE LENNERTZ

04/16/2012

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: TD
Name: DOUGHERTY, BRANDON S
Address: 495 CHATHAM CIRCLE
City-St-Zip: NAPLES, FL 34110

Title: VPD
Name: OBERMAN, WILLIAM J
Address: 460 CORBEL DRIVE
City-St-Zip: NAPLES, FL 34110

Title: SD
Name: MORRIS, CANDACE
Address: 417 CANDLEWOOD LANE
City-St-Zip: NAPLES, FL 34110

Title: PD
Name: LENNERTZ, SUSAN A
Address: 425 CANDLEWOOD LANE
City-St-Zip: NAPLES, FL 34110

Title: D
Name: GRISWOLD, DONALD C
Address: 476 CORBEL DRIVE
City-St-Zip: NAPLES, FL 34110

I hereby 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 all other like empowered.

SIGNATURE: SUSIE LENNERTZ

PD

04/16/2012

Electronic Signature of Signing Officer or Director

Date