

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Feb 19, 2008 8:00 am
Secretary of State

02-19-2008 90034 014 ****61.25

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1. Entity Name

CANDLEWOOD TWO RESIDENTS' ASSOCIATION, INC.



Principal Place of Business

558 CORBEL DR.
NAPLES FL 34110
US

Mailing Address

558 CORBEL DR.
NAPLES FL 34110
US

2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

65-0652016

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

HOGG, ANNE
558 CORBEL DRIVE
NAPLES FL 34110

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and, if applicable,

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW: FEE IS \$61.25
Due By May 1, 2008

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

Make Check Payable to
Florida Department of State

10. OFFICERS AND DIRECTORS

TITLE PD ☒ Delete
NAME WIENK, STEPHANIE
STREET ADDRESS 581 CORBEL DRIVE
CITY-ST-ZIP NAPLES FL 34110

TITLE STD ☐ Delete
NAME HOGG, ANNE
STREET ADDRESS 558 CORBEL DRIVE
CITY-ST-ZIP NAPLES FL 34110

TITLE VD ☒ Delete
NAME WHITE, ALLISON
STREET ADDRESS 598 CORBEL DRIVE
CITY-ST-ZIP NAPLES FL 34110

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE PD ☒ Change ☐ Addition
NAME AL FONTDEVILA
STREET ADDRESS 574 CORBEL DRIVE
CITY-ST-ZIP NAPLES, FL 34110

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE VD ☒ Change ☐ Addition
NAME DIANA ACKERMAN
STREET ADDRESS 590 CORBEL DRIVE
CITY-ST-ZIP NAPLES, FL 34110

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Ann E Hogg ANN E HOGG STD 2/9/2008 239-566-7190