

2025 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 728254

Entity Name: COUNTRY CLUB MANOR CONDOMINIUM ASSOCIATION OF NAPLES, INC.**FILED**
Apr 21, 2025
Secretary of State
9844118354CC**Current Principal Place of Business:**4670 CARDINAL WAY
SUITE 302
NAPLES, FL 34112**Current Mailing Address:**C/O REALMANAGE
PO BOX 803555
DALLAS, TX 75380 US**FEI Number: 59-1529413****Certificate of Status Desired: No****Name and Address of Current Registered Agent:**CT CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 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: GERALD QUINN****04/21/2025**

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title	DIRECTOR
Name	SNYDER, JACQUELINE
Address	CARDINAL MANAGEMENT GROUP, A REALMANAGE COMPANY 4670 CARDINAL WAY 302
City-State-Zip:	NAPLES FL 34112

Title	PRESIDENT
Name	QUINN, GERALD
Address	CARDINAL MANAGEMENT GROUP, A REALMANAGE COMPANY 4670 CARDINAL WAY SUITE 302
City-State-Zip:	NAPLES FL 34112

Title	TREASURER
Name	LEE, MARILYN
Address	CARDINAL MANAGEMENT GROUP, A REALMANAGE COMPANY 4670 CARDINAL WAY SUITE 302
City-State-Zip:	NAPLES FL 34112

Title	DIRECTOR
Name	LISTROM, MELANIE
Address	CARDINAL MANAGEMENT GROUP, A REALMANAGE COMPANY 4670 CARDINAL WAY SUITE 302
City-State-Zip:	NAPLES FL 34112

Title	SECRETARY
Name	HIRTH, ROBIN
Address	CARDINAL MANAGEMENT GROUP, A REALMANAGE COMPANY 4670 CARDINAL WAY SUITE 302
City-State-Zip:	NAPLES FL 34112

Title	VP
Name	LUCE, WILLIAM
Address	CARDINAL MANAGEMENT GROUP, A REALMANAGE COMPANY 4670 CARDINAL WAY
City-State-Zip:	NAPLES FL 34112

Title	DIRECTOR
Name	BROOKE, PAM
Address	CARDINAL MANAGEMENT GROUP, A REALMANAGE COMPANY 4670 CARDINAL WAY 302
City-State-Zip:	NAPLES FL 34112

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: GERALD QUINN**PRESIDENT****04/21/2025**

