

2015 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 759121

Entity Name: COACH LIGHT MANOR ASSOCIATION, INC.**Current Principal Place of Business:**18050 S. TAMIAMI TRAIL
4
FT MYERS, FL 33908**Current Mailing Address:**18050 S. TAMIAMI TRAIL
4
FT MYERS, FL 33908**FEI Number: 59-2110212****Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**BECKER&POLIAKOFF
12140 CARISSA COMMERCE COURT
STE 200
FORT MYERS, FL 33966 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:**_____
Electronic Signature of Registered Agent_____
Date**Officer/Director Detail :**

Title	PRESIDENT
Name	NOONAN, SHANNON
Address	18050 S TAMIAMI TR #99
City-State-Zip:	FORT MYERS FL 33908

Title	VP
Name	HARRIS, PATRICIA
Address	18050 S TAMIAMI TRL #2
City-State-Zip:	FORT MYERS FL 33908

Title	TREASURER
Name	DRAY, PATRICIA ANN
Address	18050 S. TAMIAMI TRAIL 4
City-State-Zip:	FT MYERS FL 33908

Title	DIRECTOR
Name	DUNCAN, TOM
Address	18050 S TAMIAMI TR #135
City-State-Zip:	FORT MYERS FL 33908

Title	DIRECTOR/SECRETARY
Name	LINDA, ANDRZEJEWSKI
Address	18050 S TAMIAMI TR #109
City-State-Zip:	FORT MYERS FL 33908

Title	DIRECTOR
Name	EMLEY, JAN
Address	18050 S. TAMIAMI TRAIL #97
City-State-Zip:	FORT MYERS FL 33908

Title	DIRECTOR
Name	SULLIVAN, JACKIE
Address	18050 S. TAMIAMI TRAIL 4
City-State-Zip:	FT MYERS FL 33908

Title	DIRECTOR
Name	BUTCHER, RUTH
Address	18050 S. TAMIAMI TRAIL 4
City-State-Zip:	FT MYERS FL 33908

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: PATRICIA DRAY**TREASURER****07/13/2015**_____
Electronic Signature of Signing Officer/Director Detail_____
Date