

2024 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:** Yes**Name and Address of Current Registered Agent:**BECKER & POLIAKOFF, P.A.
4001 TAMIAI TRAIL
SUITE 270
NAPLES, FL 34103 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	BARHORST, STEVE
Address	18050 SOUTH TAMIAMI TRAIL #113
City-State-Zip:	FORT MYERS FL 33908

Title	VP
Name	STEPHENS, JEFFREY M
Address	18050 SOUTH TAMIAMI TRAIL #77
City-State-Zip:	FORT MYERS FL 33908

Title	TREASURER
Name	SPENCER, JOAN
Address	18050 S. TAMIAMI TRAIL #89
City-State-Zip:	FT MYERS FL 33908

Title	DIRECTOR
Name	DECANINI, PAUL J.
Address	18050 S. TAMIAMI TRAIL #132
City-State-Zip:	FORT MYERS FL 33908

Title	DIRECTOR
Name	HEIDER, DAN
Address	18050 S. TAMIAMI TRAIL #177
City-State-Zip:	FT MYERS FL 33908

Title	DIRECTOR
Name	SPENCER, LARRY R
Address	18050 S. TAMIAMI TRAIL #89
City-State-Zip:	FORT MYERS FL 33908

Title	DIRECTOR
Name	HENNE, ROB
Address	18050 S. TAMIAMI TRAIL #118
City-State-Zip:	FORT MYERS FL 33908

Title	SECRETARY
Name	STICKNEY, JOYCE
Address	18050 S TAMIAMI TRAIL #175
City-State-Zip:	FORT MYERS FL 33908

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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: JOAN A. SPENCER

TREASURER

03/05/2024

Electronic Signature of Signing Officer/Director Detail_____
Date

Officer/Director Detail Continued :

Title	DIRECTOR
Name	OTTENJAN, GREG
Address	18050 S. TAMiami TRAIL #99
City-State-Zip:	FORT MYERS FL 33908