

**2020 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 770554

**Entity Name:** ORA AT CHOKOLOSKEE, INC.

**Current Principal Place of Business:**

150 SMALLWOOD DR  
CHOKOLOSKEE, FL 34138

**Current Mailing Address:**

COLLIER FINANCIAL, INC.  
4985 TAMIAMI TRAIL E.  
NAPLES, FL 34113 US

**FEI Number:** 58-1661582

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

HART, STEPHEN P  
C/O COLLIER FINANCIAL, INC  
4985 TAMIAMI TRAIL E  
NAPLES, FL 34113 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 PD  
Name COGLEY, BILL  
Address 150 SMALLWOOD DR. #203  
City-State-Zip: CHOKOLOSKEE FL 34138

Title VPD  
Name FLOYD, DANNY  
Address 150 SMALLWOOD DR. #162  
City-State-Zip: CHOKOLOSKEE FL 34138

Title SD  
Name GUSTAFSON, LINDA  
Address POB 834  
City-State-Zip: CHOKOLOSKEE FL 34138

Title TD  
Name KRUEGER, JOHN  
Address 150 SMALLWOOD DR. #029  
City-State-Zip: CHOKOLOSKEE FL 34138

Title D  
Name RONDENET, LEON  
Address 150 SMALLWOOD DR, #051  
City-State-Zip: CHOKOLOSKEE FL 34138

Title D  
Name MANCINI, DEBORAH  
Address 150 SMALLWOOD DR. #166  
City-State-Zip: CHOKOLOSKEE FL 34138

Title D  
Name STUHMILLER, LEE ANNE  
Address 150 SMALLWOOD DR, #190  
City-State-Zip: CHOKOLOSKEE FL 34138

*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:** BILL COGLEY

**PRESIDENT**

**03/27/2020**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date