

**2015 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N06000011848

**Entity Name:** GOODLETTE CORNERS LAND CONDOMINIUM ASSOCIATION, INC.

**FILED**  
**Jan 09, 2015**  
**Secretary of State**  
**CC5741629431**

**Current Principal Place of Business:**

800 FRONTAGE ROAD  
NORTHFIELD, IL 60093

**Current Mailing Address:**

800 FRONTAGE ROAD  
NORTHFIELD, IL 60093

**FEI Number: 20-8897520**

**Certificate of Status Desired: No**

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

GRABINSKI, MATTHEW L  
GOODLETTE, COLEMAN & JOHNSON, P.A.  
4001 TAMIAMI TRAIL NORTH, SUITE 300  
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 PSD  
Name HIELSCHER, RICHARD B  
Address 800 FRONTAGE ROAD  
City-State-Zip: NORTHFIELD IL 60093

Title VPTD  
Name MOON EISEL, TRUDY  
Address 4760 TAMIAMI TRAIL NORTH #2  
City-State-Zip: NAPLES FL 34103

Title D  
Name TURNER KIPP, TAMMY  
Address 3701 TAMIAMI TRAIL NORTH  
City-State-Zip: NAPLES FL 34103

*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: RICHARD B HIELSCHER**

**PSD**

**01/09/2015**

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

\_\_\_\_\_  
Date