

2014 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N28473

Entity Name: THE COMMUNITY ASSOCIATION FOR MILL RUN, COLLIER COUNTY, INC.

FILED
Apr 02, 2014
Secretary of State
CC7890553219

Current Principal Place of Business:

C/O ABILITY MANAGMENT
6736 LONE OAK BLVD
NAPLES, FL 34109

Current Mailing Address:

C/O ABILITY MANAGMENT
6736 LONE OAK BLVD
NAPLES, FL 34109 US

FEI Number: 65-0568587

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

ABILITY MANAGEMENT, INC
6736 LONE OAK BLVD
NAPLES, FL 34109 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 S
Name KING, JOHN
Address 6617 MILL RUN CIRCLE
City-State-Zip: NAPLES FL 34109

Title VP
Name WAGNER, PAT
Address 6806 WELLINGTON DRIVE
City-State-Zip: NAPLES FL 34109

Title P
Name HACKLEMAN, MICHAEL
Address 6761 MILL RUN CIRCLE
City-State-Zip: NAPLES FL 34109

Title D
Name SCHIPPER, JOHN
Address 6782 MILL RUN CIRCLE
City-State-Zip: NAPLES FL 34109

Title T
Name VANDERHAYDEN, TERRY
Address 2007 DEEFIELD CIRCLE
City-State-Zip: NAPLES FL 34109

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: MICHAEL HACKLEMAN

PRESIDENT

04/02/2014

Electronic Signature of Signing Officer/Director Detail

Date