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May 07 1998 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1998



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 705744 (1)
1. Corporation Name
PARK PLACE CLUB OF NAPLES, INC.



Principal Place of Business Mailing Address
2020 GULF SHORE BLVD N. NAPLES FL 34102-1801 US
2020 GULF SHORE BLVD N. NAPLES FL 33940-4824

3. Date Incorporated or Qualified
06/10/1963
4. FEI Number
59-1026142
Applied For
Not Applicable

2. Principal Place of Business 2a. Mailing Address
21 Suite, Apt. #, etc. 26 Suite, Apt. #, etc.
22 City & State 27 City & State
23 Zip Country 28 Zip Country
24 25 29 30 34102-1601

5. Certificate of Status Desired \$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution \$5.00 May Be Added to Fees
7. Is this nonprofit corporation a homeowners association? Yes No
8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes No

9. Name and Address of Current Registered Agent
JODER, MARJORIE J
C/O ACCOUNTING & TAX ASSOCIATES OF NAPLES
802 ANCHOR DRIVE
NAPLES FL 34103

10. Name and Address of New Registered Agent
81 Name
Linda J. Combs
82 Street Address (P.O. Box Number is Not Acceptable)
c/o Accounting & Tax Associates of Naples
83 802 Anchor Rode Drive
84 City
Naples FL 85 Zip Code
34103-2739

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE *Linda J. Combs* Linda J. Combs 4/29/98 DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	DP KENNEDY, RICHARD	1.1 TITLE	
NAME	2020 GULF SHORE BLVD., NORTH, APT. #105	1.2 NAME	
STREET ADDRESS	NAPLES FL	1.3 STREET ADDRESS	
CITY-ST-ZIP		1.4 CITY-ST-ZIP	
TITLE	DS KENNEDY, LU	2.1 TITLE	
NAME	2020 GULF SHORE BLVD. N., #105	2.2 NAME	
STREET ADDRESS	NAPLES FL	2.3 STREET ADDRESS	
CITY-ST-ZIP		2.4 CITY-ST-ZIP	
TITLE	DT LA CANFORA, PETER	3.1 TITLE	
NAME	2020 GULF SHORE BLVD. N. #208	3.2 NAME	
STREET ADDRESS	NAPLES FL	3.3 STREET ADDRESS	
CITY-ST-ZIP		3.4 CITY-ST-ZIP	
TITLE	DVP HATHAWAY, PETER L.	4.1 TITLE	
NAME	2020 GULF SHORE BLVD., NO	4.2 NAME	
STREET ADDRESS	NAPLES FL	4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE	D SHELLEY, HENRY	5.1 TITLE	
NAME	2020 GULF SHORE BLVD. N., #101	5.2 NAME	
STREET ADDRESS	NAPLES FL	5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE		6.1 TITLE	
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

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14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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 in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: *R P Kennedy* R P KENNEDY 4/29/98 (941) 261-8046

CR2E037 (10/97)