2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT#713734

FILED Apr 27, 2007 Secretary of State

Entity Nar	ne: THE WAI	RWICK CLUB OF NAPLES, IN	C.			
Current Principal Place of Business:			New Princ	New Principal Place of Business:		
280 SECO NAPLES, F	ND AVE. SOU FL 34102 U					
Current Mailing Address:			New Mailing Address:			
745 - 12TH NAPLES, F	I AVE. SOUTH FL 34102 L					
FEI Number:	59-1293398	FEI Number Applied For()	FEI Number Not Appli	icable () Certificate of Status Desired ()		
Name and	Address of C	current Registered Agent:	Name and	Address of New Registered Agent:		
745 - 12TH NAPLES, F The above	I AVE. SOUTH FL 34102 L named entity:	IS	ourpose of changing it	ts registered office or registered agent, or both		
in the State	e of Florida.					
SIGNATUF		is Cianatura of Donistand Ass	- m b	Data		
		ic Signature of Registered Age		Date		
OFFICERS	S AND DIREC	TORS:	ADDITION	S/CHANGES TO OFFICERS AND DIRECTO		
Title: Name: Address: City-St-Zip:	1VP () HOBBY, BILL 280 2ND AVE S NAPLES, FL 3		Title: Name: Address: City-St-Zip:	()Change ()Addition		
Title: Name: Address: City-St-Zip:	P () MCCARTHY, M 280 -2ND AVE NAPLES, FL 3	S #306	Title: Name: Address: City-St-Zip:	()Change()Addition		
Title: Name: Address: City-St-Zip:	S () THOMAS, JACK 280 2ND AVE S NAPLES, FL 3	i #103	Title: Name: Address: City-St-Zip:	()Change()Addition		
Title: Name: Address: City-St-Zip:	2VP () ARD, ROBERT 2346 MADISON BRIDGEPORT,		Title: Name: Address: City-St-Zip:	()Change()Addition		
Title: Name: Address: City-St-Zip:	()	Delete	Title: Name: Address: City-St-Zip:	T () Change (X) Addition HARBERT, EARL 280 2ND AVE. S. NAPLES, FL 34102		

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: MICHAEL MCCARTHY P 04/27/2007