FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State*

DIVISION OF CORPORATIONS

1996

DOCUMENT # 1. Corporation Name

(5)

THE SPINDRIFT CLUB OF NAPLES, INC.										
Principal Place	of Business	Mailing Address			- 1 188511 58881 11818 81488 14461 11818 81	II BHUU DIBHI DUDI		IAM AIAIN JAA		
2600 GULF SE NAPLES FL 33 US	HORE BLVD. NORTH 1940	2600 GULF SHORE BL NAPLES FL 33940 US	VD. NORTH			Date Incorporated or Qualified	3a. Date of	Last F	locat	
						04/03/1969		1/19		
2. Principal Pla	ice of Business	2a. Mailing Address	<u> </u>			4. FEI Number Applied For Not Applied by Not Applied Por				
21		26	·····			39 1292200			lot Applicable	
Suite, Apt. #	, etc.	Suite, Apt. #, etc.				5. Certificate of Status Desired	□ "		Additional lequired	
City & State		City & State				6. Election Campaign Financing	_ 5		May Be	
23		28				Trust Fund Contribution			to Fees	
Zip Country		Zip	Count	itry		8. This corporation has liability for int		ders.	199.032,	
24 25 9. Name and Address of Curr		29 30				Florida Statutes X Yes No 10. Name and Address of New Registered Agent				
	5. Name and Address of Core	ent neglatered Agent		11	Name	TO. Name and Address of New Hey	natered Age	<u></u>		
HOFFMA	N D.S		_	_	69 4 4 1 1	(20 D. H				
	LF SHORE BLVD. N.		8	2	Street Addre	ss (P.O. Box Number is Not Acceptable)				
	FL 33940		Ē	3		70000186	2607	>		
•			-	14	City	-06/17/960104	0030a	. Zio	Code	
•			}	İ	-	***61_25	FL			
or registere familiar with SKSNATURE	ed agent, or both, in the State of Flo h, and accept the obligations of, Se Signature, typed or printed name of registered age	orida. Such change was authorication 617.0503, Florida Statute	zed by the co s.	rpo	ration's board	tion submits this statement for the purpor of directors. I hereby accept the appoir	tment as regis	stered	agent. I am	
12		ND DIRECTORS	13.	gu. r.	ogno.oro required	ADDITIONS/CHANGES TO OFFIC		ECTÓ	RS IN 12	
₩¥.E	DP	□ DELETE ·		1.1 TITLE		D	⊠ Cr	ange	☐ Addition	
NAME	EYCK, EDWARD H. TEN J		1.2 NAME							
STREET ADDRESS	2600 GULF SHORE BLVD N	i de la companya de	1.3 STR	EET /	ADORESS					
CITY-ST-ZIP	NAPLES, FL 00000		1.4 C(T)				<u> </u>			
TITLE	ALEVANDED DEDTUA V	☐ DELETE	21 TITLE		2n	dvp/D	⊊a } Cr	iange	Addition	
NAME	ALEXANDER, BERTHA K 2600 GULF SHORE BLVD N	1	2 2 NAN		IDD0000					
STREET ADDRESS	NAPLES FL				ADDRESS					
CITY-ST-ZIP TITLE	SD DELETE		2 4 C)T 3.1 T)TL			Asst.S/D		ange	☐ Addition	
NAME	HOFFMAN, D S	_	3.2 NAN	3.2 NAME		, -	•			
STREET ADDRESS	2800 GULF SHORE BLVD N		3 3 STR	EET A	ADDRESS					
CITY-ST-ZIP	NAPLES, FL 00000		3.4. C(T							
TITLE	T ALUBATE MARK	T DEFFE				D WARE	K Ct	ange	Add₁tion	
NAME	SHIPPER, MARK 2600 GULF SHORE BLVD. N, #36					HIPPER, MARK				
STREET ADDRESS	NAPLES, FL 00000	¥, ₹30			ADDRESS					
CITY-ST-ZIP TITLE	DV DELETE			44 CITY - ST - ZIP 51 TITLE		tvP/D	57 0	iange	Addition	
NAME	DOGGUI GERMA		52 NAN		15	CVE/O			_	
STREET ADDRESS	2600 GULF SHORE BLVD N	1			ADORESS			111	196	
CITY-ST-ZIP	NAPLES FL		5.4 CITY				(-'	N	2	
TITLE				***************************************		/D	Ci	iand	Addition	
NAME	CRAWFORD, DOROTHY		6.2 NAN	Æ	I	ANDT, KEN		Ú.		
STREET ADORESS	2600 GULF SHORE BLVD. N, #26			6.3 STREET ADDRESS		00 GULF SHORE BOULEV	ARD N.,	API	r. #62	

NAPLES Ft.

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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 cath; 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 oranged, or on an attachment with an address.

SIGNATURE:

Ken Brandt, President 4/24/96 (941) 263-2094

CR2E037 (12/95)