

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 719424

1. Entity Name

NEAPOLITAN CLUB, INC.

FILED
Aug 02, 2000 8:00 am
Secretary of State

08-02-2000 90006 002 ****61.25

Principal Place of Business

792 94TH AVENUE N.
NAPLES FL 34108

Mailing Address

792 94TH AVENUE N.
NAPLES FL 34108

2. Principal Place of Business

Suite, Apt. #, etc.

City & State

Zip

Country

3. Mailing Address

Suite, Apt. #, etc.

City & State

Zip

Country

4. FEI Number

59-1882926

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required



DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

PUTMAN PROPERTY MGMT.
792 94TH AVE. N.
NAPLES FL 34108

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. 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

Signature, typed or printed name of registered agent and title, if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW: FEE IS \$61.25
After September 13, 2000 min. will be \$236.25

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

Make Check Payable to
Department of State

10. OFFICERS AND DIRECTORS

TITLE	PD	☐ Delete
NAME	MEFFET, APRIL	
STREET ADDRESS	900 8TH AVE. S. #101	
CITY-ST-ZIP	NAPLES, FL 34102	
TITLE	VPD	☐ Delete
NAME	BLUM, DENNIS	
STREET ADDRESS	5451 ASHFORD ROAD	
CITY-ST-ZIP	DUBLIN OH 43016	
TITLE	STD	☐ Delete
NAME	LITWINKA, BARBARA	
STREET ADDRESS	900 8TH AVE S.	
CITY-ST-ZIP	NAPLES FL 34102	
TITLE	D	☐ Delete
NAME	JONES, MAX C JR	
STREET ADDRESS	3190 W. CROWN POINT BLVD	
CITY-ST-ZIP	NAPLES FL 34112	
TITLE	D	☐ Delete
NAME	WALKER, J. PORTER	
STREET ADDRESS	555 DARBY GLEN LANE	
CITY-ST-ZIP	DURHAM NC 27713	
TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE	D	☒ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE	VP/D	☒ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE	S/D	☒ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

12. 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 report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

7-17-00

263-8833

CR2E037 (5/00)

Attachment # 719424

ROBERT HALL & ASSOCIATES, INC.

DOO 7686

REAL ESTATE SERVICES



1100 FIFTH AVE. SO, SUITE 201 • NAPLES, FLORIDA 34102 • (941) 434-7600 • (800) 627-HALL • FAX (941) 434-8225

Florida Department of State
Division of Corporations
PO Box 1500
Tallahassee, FL 32302-1500

July 17, 2000

Dear Sir/Madam;

Enclosed is the Annual Report for the Neapolitan Club, Inc.

We did not receive this report and called the State office several times to request blank reports prior to the due date.

The prior management company forwarded this report to a Board member just last week.

I understand from discussing this situation with one of your telephone representatives that the late fee will be waived under these circumstances.

Thank you for your support.

Sincerely;

Shirley Hingston
Accountant