

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 719424

FILED
Apr 23, 2009
Secretary of State

Entity Name: NEAPOLITAN CLUB, INC.

Current Principal Place of Business:

RESORT MANAGEMENT
2685 HORSESHOE DR. #215
NAPLES, FL 34104

Current Mailing Address:

RESORT MANAGEMENT
2685 HORSESHOE DR. #215
NAPLES, FL 34104

New Principal Place of Business:

C/O RESORT MANAGEMENT
2685 HORSESHOE DRIVE SOUTH STE#215
NAPLES, FL 34104

New Mailing Address:

C/O RESORT MANAGEMENT
2685 HORSESHOE DRIVE SOUTH STE#215
NAPLES, FL 34104

FEI Number: 59-1882926

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SCARNAVACK, ALAN N
900 8TH AVE S #103
NAPLES, FL 34102 US

Name and Address of New Registered Agent:

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

OFFICERS AND DIRECTORS:

Title: TD () Delete
Name: KNEEDLER, SUZETTE
Address: 900 S. 8TH AVE #102
City-St-Zip: NAPLES, FL 34102

Title: P () Delete
Name: SCARNAVACK, ALAN
Address: 900 8TH AVE S #103
City-St-Zip: NAPLES, FL 34102

Title: SD () Delete
Name: ARSONAULT, LORRAINE
Address: 900 S. 8TH AVE #205
City-St-Zip: NAPLES, FL 34102

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ST (X) Change () Addition
Name: BRUNO, CATHERINE
Address: 900 8TH AVE S. #205
City-St-Zip: NAPLES, FL 34102

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: VP (X) Change () Addition
Name: CARNEY, RICHARD
Address: 900 8TH AVE S. #304
City-St-Zip: 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: ALAN SCARNAVACK

P

04/23/2009

Electronic Signature of Signing Officer or Director

Date