

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Jun 12, 2007 8:00 am
Secretary of State

04-30-2007 90388 019 *****61.25
06-12-2007 90112 016 *****8.75

DOCUMENT # N06000008193	
1. Entity Name NAPLES SKI CLUB, INC.	

Principal Place of Business 11855 QUAIL VILLAS WAY NAPLES FL 34119	Mailing Address 11855 QUAIL VILLAS WAY NAPLES FL 34119
---	---

2. Principal Place of Business - No P.O. Box # 76 LeMans Drive Suite, Apt. #, etc.	3. Mailing Address 76 LeMans Drive Suite, Apt. #, etc.
---	---

City & State Naples FL	City & State Naples FL
Zip 34112	Country USA

401000

1st MOORE CR2E037 (10/06)

4. FEI Number 56-2624489	Applied For Not Applicable
------------------------------------	--------------------------------------

5. Certificate of Status Desired ☒ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent MEAD, PAT 11855 QUAIL VILLAS WAY NAPLES FL 34119
--

7. Name and Address of New Registered Agent Name: PATRICK N. FORBES Street Address (P.O. Box Number is Not Acceptable): 76 LeMans Drive City: Naples FL Zip Code: 34112

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. I am familiar with, and accept the obligations of registered agent.	
SIGNATURE PATRICK N. FORBES	DATE 4/15/07

FILE NOW: FEE IS \$61.25 Due By May 1, 2007	9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees	Make Check Payable to Florida Department of State
--	---	--

10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE NAME STREET ADDRESS CITY- ST- ZIP	P HARDING, WILLIAM 1623 DELMAR LANE NAPLES FL 34104 ☐ Delete	TITLE NAME STREET ADDRESS CITY- ST- ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY- ST- ZIP	T FORBES, PATRICK 518 MENTON LANE NAPLES FL 34112 ☐ Delete	TITLE NAME STREET ADDRESS CITY- ST- ZIP	☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY- ST- ZIP	V BELL, TOM 2150 ARIELLE DRIVE #501 NAPLES FL 34109 ☐ Delete	TITLE NAME STREET ADDRESS CITY- ST- ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY- ST- ZIP	V VAN BUREN, TONYA 2048 IMPERIAL CIRCLE NAPLES FL 34110 ☐ Delete	TITLE NAME STREET ADDRESS CITY- ST- ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY- ST- ZIP	S MEAD, PAT 11855 QUAIL VILLAS WAY NAPLES FL 34119 ☐ Delete	TITLE NAME STREET ADDRESS CITY- ST- ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY- ST- ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY- ST- ZIP	☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, 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 duly empowered	
SIGNATURE: PATRICK N. FORBES	DATE: 4/15/07