2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 29, 2005
Secretary of State

DOCUMENT# N34066

Entity Name: NAPLES NATIONAL GOLF CLUB, INC.

Current Principal Place of Business:

9325 COLLIER BLVD
NAPLES, FL 34114 US

New Principal Place of Business:

Current Mailing Address:

9325 COLLIER BLVD
NAPLES, FL 34114 US

New Mailing Address:

FEI Number: 65-0150321 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

PORTNOY, BERNARD N.
350 3RD AVE. S.
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:	PRES	( ) Delete
Name:	SCHULTE, FRED C	
Address:	490 PALM CIRCLE WEST	
City-St-Zip:	NAPLES, FL 34102	
Title:	S	( ) Delete
Name:	PORTNOY, BERNARD N.,	
Address:	350 3RD AVE. S	
City-St-Zip:	NAPLES, FL 34102	
Title:	D	( ) Delete
Name:	FAY, WILLIAM	
Address:	137 2ND AVE. N.	
City-St-Zip:	NAPLES, FL 34102	
Title:	D	( ) Delete
Name:	PETTINELLI, VINCENT, D.	
Address:	8231 BAY COLONY DR. #1602	
City-St-Zip:	NAPLES, FL 34108	
Title:	T	( ) Delete
Name:	HERLIHY, JOHN J	
Address:	2601 GULF SHORE BLVD. N. #5	
City-St-Zip:	NAPLES, FL 34103	
Title:	V	( ) Delete
Name:	SKINNER, C. MICKEY	
Address:	6975 GREEN TREE DR.	
City-St-Zip:	NAPLES, FL 34108	

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title:		( ) Change ( ) Addition
Name:		
Address:		
City-St-Zip:		
Title:		( ) Change ( ) Addition
Name:		
Address:		
City-St-Zip:		
Title:		( ) Change ( ) Addition
Name:		
Address:		
City-St-Zip:		
Title:		( ) Change ( ) Addition
Name:		
Address:		
City-St-Zip:		
Title:	T	(X) Change ( ) Addition
Name:	BOLSTER, WILLIAM	
Address:	2901 GULF SHORE BLVD. N. #802	
City-St-Zip:	NAPLES, FL 34103	
Title:		( ) Change ( ) Addition
Name:		
Address:		
City-St-Zip:		

I hereby certify that the information supplied with this filing does not qualify for the 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 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: FRED C SCHULTE PRES 03/29/2005

Electronic Signature of Signing Officer or Director — Date