

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N34066

FILED
Apr 17, 2007
Secretary of State

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: D () Delete
Name: SCHULTE, FRED C
Address: 490 PALM CIRCLE WEST
City-St-Zip: NAPLES, FL 34102

Title: VP () 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: BOLSTER, WILLIAM
Address: 2901 GULF SHORE BLVD. N. #802
City-St-Zip: NAPLES, FL 34103

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

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 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: BERNARD PORTNOY

VP

04/17/2007

Electronic Signature of Signing Officer or Director

Date