

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 27, 2006 8:00 am
Secretary of State

03-27-2006 90263 007 ****61.25

DOCUMENT # N95000005526

1. Entity Name
**CLUB RAPHAEL AT PELICAN BAY CONDOMINIUM
ASSOCIATION, INC.**



Principal Place of Business
**7117 PELICAN BAY BLVD
NAPLES, FL 34108 US**

Mailing Address
**7117 PELICAN BAY BLVD
NAPLES, FL 34108 US**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

01262006 Chg-NP CR2E037 (11/05)

4. FEI Number
65-0678492

Applied For
Not Applicable

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

6. Name and Address of Current Registered Agent

**FALK, STEVEN M ESQ
850 PARK SHORE DRIVE, 3RD FLOOR
NAPLES, FL 34103**

7. Name and Address of New Registered Agent

**Becker & Poliakoff, P.A., c/o Joseph E. Adams, Esq.
Street Address (P.O. Box Number is Not Acceptable)
4501 Tamiami Trail North, Suite 214
City **Naples** FL Zip Code **34103****

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

Joseph E. Adams

Joseph E. Adams, Esquire

01-31-06

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

(NOTE: Registered Agent signature required when reinstating)

DATE

**Filing Fee is \$61.25
Due by May 1, 2006**

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

TITLE **V** ☒ Delete
NAME **MARKOWITZ, ANN**
STREET ADDRESS **7117 PELICAN BAY BLVD #1106**
CITY-ST-ZIP **NAPLES, FL 34108**

TITLE **T** ☒ Delete
NAME **COHON, ALYS**
STREET ADDRESS **7117 PELICAN BAY BLVD #209**
CITY-ST-ZIP **NAPLES, FL 34108**

TITLE **S** ☐ Delete
NAME **BROWN, JULIE**
STREET ADDRESS **7117 PELICAN BAY BLVD #605**
CITY-ST-ZIP **NAPLES, FL 34108**

TITLE **P** ☒ Delete
NAME **RAIA, THEODORE**
STREET ADDRESS **7117 PELICAN BAY BLVD 404**
CITY-ST-ZIP **NAPLES, FL 34108**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE **P/D** ☐ Change ☒ Addition
NAME **Michael Gaschler**
STREET ADDRESS **7117 Pelican Bay Blvd #605**
CITY-ST-ZIP **Naples FL 34108**

TITLE **V/D** ☐ Change ☒ Addition
NAME **Margaret Traiser**
STREET ADDRESS **7117 Pelican Bay Blvd #1401**
CITY-ST-ZIP **Naples FL 34108**

TITLE **T/D** ☒ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE **S/D** ☐ Change ☒ Addition
NAME **Alfred A. Flynn**
STREET ADDRESS **7117 Pelican Bay Blvd #505**
CITY-ST-ZIP **Naples FL 34108**

TITLE **D** ☐ Change ☒ Addition
NAME **Stephen Berger**
STREET ADDRESS **7117 Pelican Bay Blvd #804**
CITY-ST-ZIP **Naples FL 34108**

TITLE **D** ☐ Change ☒ Addition
NAME **Thomas Fowler**
STREET ADDRESS **3310 E. Sunshine**
CITY-ST-ZIP **Springfield MO 65808**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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:

Julie M. Brown as Treasurer
Julie M. Brown, Treasurer

3-14-2006


239-514-3665

Date

Daytime Phone #

ATTACHMENT

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

| | | | | | |
|--|--|--|---|--|--|
| DOCUMENT # N95000005526 1. Entity Name CLUB RAPHAEL AT PELICAN BAY CONDOMINIUM ASSOCIATION, INC. | | | |  | |
| Principal Place of Business 7117 PELICAN BAY BLVD NAPLES, FL 34108 US | | | | Mailing Address 7117 PELICAN BAY BLVD NAPLES, FL 34108 US | |
| 2. Principal Place of Business Suite, Apt. #, etc. | | 3. Mailing Address Suite, Apt. #, etc. | | <div style="font-size: 2em; font-family: cursive;">40039820</div> <div style="background-color: black; width: 200px; height: 30px; margin: 5px auto;"></div> | |
| City & State | | City & State | | 4. FEI Number 65-0678492 | |
| Zip | | Country | | 5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required | |
| 6. Name and Address of Current Registered Agent FALK, STEVEN M ESQ 850 PARK SHORE DRIVE, 3RD FLOOR NAPLES, FL 34103 | | | | 7. Name and Address of New Registered Agent Becker & Poliakoff, P.A., 40 Joseph E. Adams, Esq. Street Address (P.O. Box Number is Not Acceptable) 4501 Tamiami Trail North, Suite 214 City <u>Naples</u> FL <u>34103</u> | |
| 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 <u>Joseph E. Adams</u> <small>Signature, typed or printed name of registered agent and title if applicable.</small> | | <u>Joseph E. Adams, Esquire</u> <small>(NOTE: Registered Agent signature required when reinstating)</small> | | <u>01-31-06</u> <small>DATE</small> | |
| Filing Fee is \$61.25 Due by May 1, 2006 | | 9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> | | \$5.00 May Be Added to Fees | |
| <div style="text-align: right;"> <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition </div> | | | | | |
| 10. OFFICERS AND DIRECTORS | | | 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 | | |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | V MARKOWITZ, ANN 7117 PELICAN BAY BLVD #1106 NAPLES, FL 34108 | <input checked="" type="checkbox"/> Delete | TITLE NAME STREET ADDRESS CITY-ST-ZIP | Jack Ribeiro 7117 Pelican Bay Blvd #306 Naples FL 34108 | <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | T COHON, ALYS 7117 PELICAN BAY BLVD #209 NAPLES, FL 34108 | <input checked="" type="checkbox"/> Delete | TITLE NAME STREET ADDRESS CITY-ST-ZIP | | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | S BROWN, JULIE 7117 PELICAN BAY BLVD #605 NAPLES, FL 34108 | <input type="checkbox"/> Delete | TITLE NAME STREET ADDRESS CITY-ST-ZIP | | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | P RAIA, THEODORE 7117 PELICAN BAY BLVD 404 NAPLES, FL 34108 | <input checked="" type="checkbox"/> Delete | TITLE NAME STREET ADDRESS CITY-ST-ZIP | | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | | <input type="checkbox"/> Delete | TITLE NAME STREET ADDRESS CITY-ST-ZIP | | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | | <input type="checkbox"/> Delete | TITLE NAME STREET ADDRESS CITY-ST-ZIP | | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| 12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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: <u>Julie M. Brown as Treasurer</u> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small> | | | <u>3-14-2006</u> <u>239-514-3605</u> <small>Date Daytime Phone #</small> | | |