2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 09, 2009
Secretary of State

DOCUMENT# 703616

Entity Name: NAPLES ATHLETIC CLUB, INC.

Current Principal Place of Business:

3838 TAMIAMI TRAIL NORTH
STE 306
NAPLES, FL 34103 US

New Principal Place of Business:

Current Mailing Address:

3838 TAMIAMI TRAIL NORTH
STE 306
NAPLES, FL 34103 US

New Mailing Address:

FEI Number: 59-1022274 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

GREGORY, C. NEIL
ROETZEL & ANDRESS
850 PARK SHORE DR
NAPLES, FL 34103 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:	T	( ) Delete
Name:	GHORAYEB, IBRAHIM	
Address:	216 COLONADE CIRCLE	
City-St-Zip:	NAPLES, FL 34103	
Title:	P	( ) Delete
Name:	DAVIDSON, WAYNE A	
Address:	3575 RUM ROW	
City-St-Zip:	NAPLES, FL 34102	
Title:	D	( ) Delete
Name:	CANTON, RICHARD	
Address:	2905 GULF SHORE BLVD, NORTH	
City-St-Zip:	NAPLES, FL 34103	
Title:	S	( ) Delete
Name:	MILLER, WADE	
Address:	736 ASHBURTON DRIVE	
City-St-Zip:	NAPLES, FL 34110	
Title:	D	( ) Delete
Name:	SIEBERT, BOYD	
Address:	107 CLUBHOUSE LANE #393	
City-St-Zip:	NAPLES, FL 34110	
Title:	V	( ) Delete
Name:	COGGIN, GREGORY	
Address:	3838 TAMIAMI TRAIL N	
City-St-Zip:	NAPLES, FL 34103	

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 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: IBRAHIM GHORAYEB T 02/09/2009

Electronic Signature of Signing Officer or Director — Date