2014 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 705744

Entity Name: PARK PLACE CLUB OF NAPLES, INC.

FILED Mar 19, 2014 **Secretary of State** CC8205049243

Current Principal Place of Business:

C/O GULF VIEW PROPERTY MGMT. INC 2335 9TH ST. N. STE. 505 NAPLES, FL 34103

Current Mailing Address:

C/O GULF VIEW PROPERTY MGMT. INC 2335 9TH ST. N. STE. 505 NAPLES, FL 34103 US

FEI Number: 59-1026142 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

GULF VIEW PROPERTY MGMT., INC 2335 9TH ST. N. STE 505 NAPLES, FL 34103 US

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

Name

MOORE, KATE

Officer/Director Detail:

Title ٧P Title

HATHAWAY, PETER L JOHNSTON, PAUL Name Name Address 2020 GULF SHORE BLVD. NO. 108 Address 5 CRESTWOOD ROAD MARBLEHEAD MA 01945 City-State-Zip: NAPLES FL 34102 City-State-Zip:

Title **SECRETARY** Title Ρ

Name ROBERTS, BROOKE 2020 GULF SHORE BLVD N # 201 Address 2020 GULF SHORE BLVD N #204 Address

City-State-Zip: NAPLES FL 34102 City-State-Zip: NAPLES FL 34102

Title **DIRECTOR** Title DIRECTOR

Name MANDIA, FRANCIS Name LAM, KIM-ANH 26 EMERSON RD Address Address 3150 BINNACLE DR #206

City-State-Zip: NEW HARTFORD NY 13413 City-State-Zip: NAPLES FL 34103

Title **DIRECTOR** CLARKE, DAVID Name

Address 2020 GULF SHORE BLVD., N 208

NAPLES FL 34102 City-State-Zip:

I hereby 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 all other like empowered.

03/19/2014 SIGNATURE: BROOKE ROBERTS **PRES**

Date