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. SIGNATURE: THOMAS EASTEP

City-State-Zip: NAPLES FL 34102

Title	VP	Title	PRESIDENT
Name	VINCENT, MONIKA	Name	EASTEP, THOMAS
Address	72 7TH STREET SOUTH #102	Address City-State-Zip:	213-D WOODMERE DRIVE WILLIAMSBURG VA 23185
City-State-Zip:	NAPLES FL 34102	Title	SECRETARY
Title	TREASURER	Name Address City-State-Zip:	
Name	BARRY, DONALD		HOWARD, JOHN
Address	219 MAPLES ST		337 BUNCOMBE STREET RALEIGH NC 27609
City-State-Zip:	NORTHFIELD MN 55057		
Title	DIRECTOR		
Name	DIGIACOMO, LOUIS		
Address	72 7TH STREET SOUTH #208		

FEI Number: 59-1519567

Name and Address of Current Registered Agent:

Electronic Signature of Registered Agent

GOEDE & ADAMCZYK 8950 FONTANA DEL SOL WAY #100 NAPLES, FL 34109 US

Officer/Director Detail :

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.

NAPLES, FL 34104

2685 HORSESHOE DR. SUITE 215 NAPLES, FL 34104 US

SIGNATURE: STEVE ADAMCZYK

Current Mailing Address:

C/O RESORT MANAGEMENT

2685 HORSESHOE DR. SUITE 215

Entity Name: PARK TERRACE CLUB OF NAPLES, INC.

2017 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 718451

C/O RESORT MANAGEMENT

Current Principal Place of Business:

Apr 11, 2017 Secretary of State CC0753553613

04/11/2017

Date

FILED

Certificate of Status Desired: No

04/11/2017

Electronic Signature of Signing Officer/Director Detail

PRESIDENT

Date