

**2013 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N09000007331

**FILED**  
**Jan 16, 2013**  
**Secretary of State**  
**CC3554296320**

**Entity Name:** GREATER SW FLORIDA PARADISE IOWA CLUB, INC.

**Current Principal Place of Business:**

5127 SW 18TH AVE  
CAPE CORAL, FL 33914

**Current Mailing Address:**

PO BOX 1411  
FT MYERS, FL 33902

**FEI Number: 27-0488410**

**Certificate of Status Desired: No**

**Name and Address of Current Registered Agent:**

MCBRIDE, JUSTIN D  
5127 SW 18TH AVE  
CAPE CORAL, FL 33914 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

\_\_\_\_\_  
Date

**Officer/Director Detail :**

Title P  
Name MCBRIDE, JUSTIN D  
Address 5127 SW 18TH AVE  
City-State-Zip: CAPE CORAL FL 33914

Title D  
Name JANDIK, KEN  
Address 5251 WESTMINSTER DR  
City-State-Zip: FT MYERS FL 33919

Title D  
Name JANDIK, AMBER  
Address 5251 WESTMINSTER DR  
City-State-Zip: FT MYERS FL 33919

Title D  
Name HELDORFER, KEVIN  
Address 23640 WALDEN CT DR #306  
City-State-Zip: BONITA SPRINGS FL 34134

*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: JUSTIN D. MCBRIDE**

**PRESIDENT**

**01/16/2013**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date