

2024 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N16150

Entity Name: IMPERIAL GOLF CLUB, INC.

Current Principal Place of Business:

1808 IMPERIAL GOLF COURSE BLVD
NAPLES, FL 34110

Current Mailing Address:

1808 IMPERIAL GOLF COURSE BLVD
NAPLES, FL 34110 US

FEI Number: 59-1425712

Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

LEE, JOHN D
1808 IMPERIAL GOLF COURSE BLVD.
NAPLES, FL 34110 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: JOHN D. LEE

04/05/2024

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title DIRECTOR
Name DARGENE, MARK JOSEPH
Address 1917 IMPERIAL GOLF COURSE BLVD.
City-State-Zip: NAPLES FL 34110

Title DIRECTOR
Name BETH, SIMMONS
Address 15381 SCRUB JAY LANE
City-State-Zip: BONITA SPRINGS FL 34135

Title PRESIDENT
Name MICHAELS, STEPHEN G
Address 6001 PELICAN BAY BLVD.
APT. 1505
City-State-Zip: NAPLES FL 34108

Title VP
Name PERKINS, JUDITH PAULL
Address 2027 DUKE DRIVE
City-State-Zip: NAPLES FL 34110

Title TREASURER
Name BJORNCRANTZ, CARL EDUARD
Address 6040 PELICAN BAY BLVD
#202D
City-State-Zip: NAPLES FL 34108

Title DIRECTOR
Name DEEB, DENNIS
Address 11 BLUEBILL AVEV
#1001
City-State-Zip: NAPLES FL 34108

Title DIRECTOR
Name BILLINGSLEY, JOHN
Address 8420 EXCALIBUR CIRCLE
City-State-Zip: NAPLES FL 34110

Title DIRECTOR, SECRETARY
Name LINDA, MCINTYRE
Address 7052 VERDE WAY
City-State-Zip: NAPLES FL 34108

Continues on page 2

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: STEPHEN MICHAELS

PRESIDENT

04/05/2024

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title DIRECTOR
Name MCCAFFREY, JOHN
Address 9921 CASSABELLA WAY
City-State-Zip: BONITA SPRINGS FL 34135