

**2014 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:**

PO BOX 111809  
NAPLES, FL 34108 US

**FEI Number:** 59-1425712

**Certificate of Status Desired:** No

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

MATTSSON, KATHI  
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:** \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

**Officer/Director Detail :**

Title TD, TREASURER  
Name MCCLYMONT, MICHAEL  
Address 1936 PRINCESS COURT  
City-State-Zip: NAPLES FL 34110

Title D  
Name GOETT, ED  
Address 8175 LOWBANK  
City-State-Zip: NAPLES FL 34109

Title PRESIDENT  
Name MCCOWN, CLAIRE  
Address 1976 COUNTESS COURT  
City-State-Zip: NAPLES FL 34110

Title DIRECTOR  
Name WILSON, THOMAS  
Address 1973 TIMARRON WAY  
City-State-Zip: NAPLES FL 34109

Title DIRECTOR  
Name PARADISO, DON  
Address 1904 PRINCESS COURT  
City-State-Zip: NAPLES FL 34110

Title VP  
Name THOMAS, LARRY  
Address 11125 GULF SHORE DR.  
404  
City-State-Zip: NAPLES FL 34108

Title SECRETARY  
Name BALDWIN, ANNE  
Address 1808 IMPERIAL GOLF COURSE BLVD  
City-State-Zip: NAPLES FL 34110

Title DIRECTOR  
Name COY, BAGGETT  
Address 1808 IMPERIAL GOLF COURSE BLVD  
City-State-Zip: NAPLES FL 34110

**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:** CLAIRE MCCOWN

**PRESIDENT**

**02/20/2014**

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

\_\_\_\_\_  
Date

**Officer/Director Detail Continued :**

Title            DIRECTOR  
Name            MOHAN, JAMES  
Address        1808 IMPERIAL GOLF COURSE BLVD  
City-State-Zip: NAPLES FL 34110