2015 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

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	E: JOHN D. LEE		04/27/2015
	Electronic Signature of Registered Agent		Date
Officer/Dire	ctor Detail :		
Title	TD, TREASURER	Title	DIRECTOR
Name	MCCLYMONT, MICHAEL	Name	DEDIC, RON
Address	1936 PRINCESS COURT	Address	8930 BAY COLONY DRIVE
City-State-Zip:	NAPLES FL 34110	City-State-Zip:	SALERNO BLDG-1502 NAPLES FL 34108
Title	DIRECTOR	Title	DIRECTOR
Name	DROUBIE, GARY	Name	ELLENBOGEN, BILL
Address	2028 DUKE DRIVE	Address	2002 IMPERIAL GOLF CLUB BLVD.
City-State-Zip:	NAPLES FL 34110		NAPLES FL 34110
Title	VP	Title	PRESIDENT
Name	PARADISO, DON	Name	THOMAS, LARRY
Address	1904 PRINCESS COURT		
City-State-Zip:	NAPLES FL 34110	Address	11125 GULF SHORE DR. 404
,		City-State-Zip:	NAPLES FL 34108
Title	SECRETARY		
Name	BALDWIN, ANNE	Title	DIRECTOR
Address	1808 IMPERIAL GOLF COURSE BLVD	Name	COY, BAGGETT
City-State-Zip:	NAPLES FL 34110	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: LARRY THOMAS

PRESIDENT

04/27/2015

Electronic Signature of Signing Officer/Director Detail

FILED Apr 27, 2015

Secretary of State

Certificate of Status Desired: No

Date

Officer/Director Detail Continued :

Title	DIRECTOR
Name	KIRK, JAMES
Address	765 BENTWATER CIRCLE UNIT 201
City-State-Zip:	NAPLES FL 34108