2021 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N34066

Entity Name: NAPLES NATIONAL GOLF CLUB, INC.

Current Principal Place of Business:

9325 COLLIER BLVD NAPLES. FL 34114

Current Mailing Address:

9325 COLLIER BLVD NAPLES, FL 34114 US

FEI Number: 65-0150321 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

ROBINSON, WILLIAM J 9325 COLLIER BLVD. NAPLES, FL 34114 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: WILLIAM J ROBINSON 03/29/2021

Electronic Signature of Registered Agent

Officer/Director Detail:

TitleDIRECTOR, TREASURERTitleDIRECTORNameMARTIN, KENNETHNameOYER, JAY

Address 1 LIGHTNING BUG HOLLOW ROAD Address 22 DELLWOOD PARKWAY SOUTH

City-State-Zip: HARDWICK NJ 07825 City-State-Zip: MADISON NJ 07940

Title DIRECTOR Title DIRECTOR

NameSWEENEY, MICHAEL V MR.NameHANSEL, KEITH D.Address171 CYPRESS VIEW DR.Address6672 COSTA CIRCLECity-State-Zip:NAPLES FL 34113City-State-Zip:NAPLES FL 34113

Title DIRECTOR Title DIRECTOR

Name MCDONALD, PETER D. Name RITER, ROBERT L.

Address 4251 GULF SHORE BLVD., NORTH Address 4855 WHISPERING PINE WAY

City-State-Zip: NAPLES FL 34102 City-State-Zip: NAPLES FL 34103

Title DIRECTOR, SECRETARY Title DIRECTOR, TREASURER
Name BARTTER, BRIT J. Name BELKNAP, JAMES MICHAEL

Address 3377 GULF SHORE BLVD., N. Address 8990 BAY COLONY DR. #701

City-State-Zip: NAPLES FL 34103 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: CHRISTOPHER J COUGHLIN PRESIDENT 03/29/2021

Electronic Signature of Signing Officer/Director Detail

Date

FILED Mar 29, 2021

Secretary of State

6270254259CC

Date

Officer/Director Detail Continued:

TitleDIRECTOR, PRESIDENTTitleDIRECTORNameCOUGHLIN, CHRISTOPHER J.NameWELLS, DAREN

Address 27731 MARINA POINTE DR. Address 2850 LEEWARD LANE
City-State-Zip: BONITA SPRINGS FL 34134 City-State-Zip: NAPLES FL 34103