2016 FLORIDA NOT FOR PROFIT CORPORATION AMENDED 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:

WHITFIELD, BENJAMIN C 5042 FAIRHAVEN LANE NAPLES, FL 34109 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: BENJAMIN C. WHITFIELD 05/10/2016

Electronic Signature of Registered Agent

Date

FILED

May 10, 2016 **Secretary of State**

CC7564027680

Officer/Director Detail:

Title PRESIDENT, & DIRECTOR Title DIRECTOR

Name MINYARD, ROBERT Name COSTLEY, GARY DR.

257 BAREFOOT BEACH BLVD. Address 451 21ST AVE. S. Address

UNIT 404

DIRECTOR

DIRECTOR

#701

City-State-Zip: NAPLES FL 34102 City-State-Zip: BONITA SPRINGS FL 34134

Title DIRECTOR, TREASURER

D'ANGELO, II, GEORGE MR. Name Name HANSEL, KEITH D.

Address 435 THIRD AVE., SOUTH Address 8990 MUSTANG ISLAND CIRCLE

Title

Title

Title

City-State-Zip: NAPLES FL 34102

City-State-Zip: NAPLES FL 34113

Title **SECRETARY**

DIRECTOR Name MCDONALD, PETER D. GROETSCH. DAVID Name

Address 4251 GULF SHORE BLVD., NORTH Address 207 MERMAIDS BRIGHT

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

Title DIRECTOR

Name BARTTER, BRIT J. Name

BELKNAP, JAMES MICHAEL 3377 GULF SHORE BLVD., N. Address Address 8990 BAY COLONY DR.

City-State-Zip: NAPLES FL 34103

City-State-Zip: NAPLES FL 34108

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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.

05/10/2016 SIGNATURE: ROBERT MINYARD **PRESIDENT**

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued:

Title DIRECTOR

Name COUGHLIN, CHRISTOPHER J. Address 27731 MARINA POINTE DR.

City-State-Zip: BONITA SPRINGS FL 34134