

**2022 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N95000004603

**Entity Name:** THE CLUB AT BAREFOOT BEACH, INC.

**Current Principal Place of Business:**

105 SHELL DRIVE  
BONITA SPRINGS, FL 34134

**Current Mailing Address:**

105 SHELL DRIVE  
BONITA SPRINGS, FL 34134 US

**FEI Number:** 65-0604776

**Certificate of Status Desired:** No

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

TOLER, WILLIAM  
105 SHELL DRIVE  
BONITA SPRINGS, FL 34134 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 TOLER

01/28/2022

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title            PRESIDENT  
Name            TOLER, WILLIAM  
Address        202 SAN MATEO DRIVE  
City-State-Zip: BONITA SPRINGS FL 34134

Title            VP  
Name            BEVERUNG, CLYDE L  
Address        264 BAREFOOT BEACH BLV  
                  502  
City-State-Zip: BONITA SPRINGS FL 34134

Title            SECRETARY  
Name            POTTS, ROBERT  
Address        267 BAREFOOT BEACH BLVD  
                  605  
City-State-Zip: BONITA SPRINGS FL 34134

Title            TREASURER  
Name            BRODMAN, DOUGLAS  
Address        232 BAREFOOT BEACH BLVD  
City-State-Zip: BONITA SPRINGS FL 34134

Title            DIRECTOR  
Name            FAULK, TERRY  
Address        13675 VANDERBILT DRIVE  
                  808  
City-State-Zip: NAPLES FL 34134

Title            DIRECTOR  
Name            PUTT, BRYAN  
Address        204 SAN MATEO DRIVE  
City-State-Zip: BONITA SPRINGS FL 34134

Title            CEO  
Name            MOELLER, DALE II  
Address        19973 ESTERO VERDE DRIVE  
City-State-Zip: FORT MYERS FL 33908

Title            C  
Name            DECKER, MARGARET M  
Address        15166 PARK SIDE DRIVE  
                  #8  
City-State-Zip: FORT MYERS FL 33908

**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:** MARGARET DECKER

C

01/28/2022

Electronic Signature of Signing Officer/Director Detail

Date

**Officer/Director Detail Continued :**

Title           DIRECTOR  
Name           ROYAL, CRAIG  
Address        269 BAREFOOT BEACH BLVD  
                PH #1  
City-State-Zip: BONITA SPRINGS FL 34134