


**2006 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Jan 12, 2006 08:00 AM
Secretary of State
RECORDED

JAN 06 2006

DOCUMENT # 130335 1. Entity Name NAPLES GOLF AND BEACH CLUB, INC.	
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Principal Place of Business M E WATKINS 851 GULF SHORE BLVD. N. NAPLES, FL 34102	Mailing Address M E WATKINS 851 GULF SHORE BLVD. N. NAPLES, FL 34102
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01062006 No Chg-P CR2E034 (11/05)

4. FEI Number 59-0702939	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input checked="" type="checkbox"/>	\$8.75 Additional Fee Required

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent WATKINS, MICHAEL E. 851 GULF SHORE BLVD. N. NAPLES, FL 34102	DO NOT WRITE IN THIS SPACE
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8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating)

**FILE NOW!!! FEE IS \$150.00
After May 1, 2006 Fee will be \$550.00**

9. Election Campaign Financing Trust Fund Contribution. ☐ **\$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD CARROLL, TIMOTHY C 3 FIRST NAT'L PLAZA, 70 W MADISON CHICAGO, IL 60602
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DP WATKINS, MICHAEL E 851 GULF SHORE BLVD. N. NAPLES, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	AS FULLER, MARION M. 541 1ST AVE SOUTH NAPLES, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TV AZAMI, MOHAMMAD A. 6747 STONEGATE DR NAPLES, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S DEAS, JAN 1355 WISCONSIN DR NAPLES, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

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01/18/06-80001-014 158.75

**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 607, Florida Statutes, and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:  **M.A. AZAMI** 1-6-06 (239) 435-4377
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR VP+ TREASURER Date Daytime Phone #