2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Jan 28, 2005 8:00 am
Secretary of State
01-28-2005 90030 039 ****70.00

DOCUMENT # 711769

1. Entity Name

NAPLES WOMAN'S CLUB, INC.

Principal Place of Business	Mailing Address
570 PARK STREET NAPLES FL 34102 US	570 PARK STREET NAPLES FL 34102 US

1st MOORE CR2E037 (10/04)

2. Principal Place of Business	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Zip / Country	Zip / Country

4. FEI Number 59-0907298 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☒ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
GHORAYEB, FAY 216 COLONADE CIR. NAPLES FL 34103	Name: Patricia Stentz Street Address (P.O. Box Number is Not Acceptable): 5910 Rolling Oaks Court City: Naples, FL Zip Code: 34110

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: Patricia Stentz Patricia Stentz, 1/19/05
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW: FEE IS $61.25
Due By May 1, 2005

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

Make Check Payable to Florida Department of State

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	TD RAFFALDINI, THERESA 387 EDGEMERE WAY NORTH NAPLES FL 34105	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☒ Change ☐ Addition 3430 Gulf Shore Blvd. N. Unit 5J Naples, 34103
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	SD WILLEY, BARBARA 1125 8TH AVE., NORTH NAPLES FL 34102	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	SD ☒ Change ☐ Addition Donna Porter2056 2056 Imperial Circle Naples, FL 34110
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VPD DAHL, ARLEEN 5863 COBBLESTONE LN., FL 101 NAPLES FL 34112	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☒ Change ☐ Addition 1st VP Patricia Trowbridge 366 Harvard Lane, Naples, 34104
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VPD GUTHRIE, CAROL 7786 NAPLES HERITAGE DR. NAPLES FL 34112	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	2nd VP ☒ Change ☐ Addition Joan Lisa 3951 Gulf Shore Blvd. N #1104 Naples, FL 34103
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VPD GHORAYEB, FAY 137 SECOND AVENUE NORTH NAPLES FL 34102	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VPD ☒ Change ☐ Addition Linda Meyer 5920 Cranbrook Way @201 Naples, FL 34112
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VPD STENZ, PATRICIA 7846 HERITAGE DRIVE NAPLES FL 34112	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☒ Change ☐ Addition President 5910 Rolling Oaks Ct. Naples, FL 34110

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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 617, 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: Theresa Raffaldini, Theresa Raffaldini, Treasurer 1/19, 2005
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #