

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 714008

FILED  
Jan 20, 2009  
Secretary of State

**Entity Name:** THE MOORINGS COUNTRY CLUB OF NAPLES, INC.

**Current Principal Place of Business:**

2500 CRAYTON ROAD  
NAPLES, FL 34103

**New Principal Place of Business:**

**Current Mailing Address:**

2500 CRAYTON ROAD  
NAPLES, FL 34103

**New Mailing Address:**

**FEI Number:** 59-1221044

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

CHRISTESON, HOWARD  
300 PARK SHORE DR  
NAPLES, FL 34103 US

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

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:

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

Title: S ( ) Delete  
Name: LIPPERT, MARCHA  
Address: 4101 GULF SHORE BLVD N PH3  
City-St-Zip: NAPLES, FL 34103

Title: T ( ) Delete  
Name: JOHNSON, BRIAN  
Address: 707 RIVIERA DR  
City-St-Zip: NAPLES, FL 34103

Title: VP ( ) Delete  
Name: KOPP, JAMES  
Address: 7225 PELICAN BAY BLVD 604  
City-St-Zip: NAPLES, FL 34108

Title: VP ( ) Delete  
Name: WILDER, JOHN T  
Address: 3410 GULF SHORE BLVD N. #301  
City-St-Zip: NAPLES, FL 34103

Title: P ( ) Delete  
Name: CHRISTESON, HOWARD  
Address: 300 PARK SHORE DRIVE  
City-St-Zip: NAPLES, FL 34103

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: S (X) Change ( ) Addition  
Name: SIMS, STELLA  
Address: 4021 GULF SHORE BLVD, N #203  
City-St-Zip: NAPLES, FL 34103

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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 an address, with all other like empowered.

SIGNATURE: HOWARD CHRISTESON

P

01/20/2009

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date