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Apr 08 1997 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # 714690 (5)
1. Corporation Name
THE BARBADOS CLUB, INC.



Principal Place of Business 4501 TAMiami TR N #223 NAPLES FL 33940	Mailing Address 4501 TAMiami TR N #223 NAPLES FL 34103-3023
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3. Date Incorporated or Qualified 05/31/1968	3a. Date of Last Report 03/26/1996
4. FEI Number 59-1285720	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
B. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	

2. Principal Place of Business 21 4933 Tamiami Trail N Suite, Apt. #, etc. 22 Suite 200 City & State 23 Naples, FL 34103 Zip Country 24 25	2a. Mailing Address 26 4933 Tamiami Trail N Suite, Apt. #, etc. 27 Suite 200 City & State 28 Naples, FL 34103 Zip Country 29 30
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9. Name and Address of Current Registered Agent

WHITE, LAURANIE L.
4501 TAMiami TR N 223
NAPLES FL 33940

10. Name and Address of New Registered Agent

81 Name White, Lauranie L.
82 Street Address (P.O. Box Number is Not Acceptable) 4933 Tamiami Trail N
83 Suite Suite 200
84 City Naples
85 Zip Code FL 34103

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

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

12. OFFICERS AND DIRECTORS

TITLE	TDV	<input checked="" type="checkbox"/> DELETE
NAME	PASSIDOMO, GLORIA	
STREET ADDRESS	207 HARBOUR DR	
CITY-ST-ZIP	NAPLES FL	
TITLE	SD	<input checked="" type="checkbox"/> DELETE
NAME	DOOLITTLE, JEAN	
STREET ADDRESS	207 HARBOUR DR	
CITY-ST-ZIP	NAPLES FL	
TITLE	PD	<input type="checkbox"/> DELETE
NAME	PASTOR, SEWALL	
STREET ADDRESS	207 HARBOUR DR	
CITY-ST-ZIP	NAPLES FL	
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	VPD	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
1.2 NAME	Fowler, Hudson, Jr. Dr.	
1.3 STREET ADDRESS	207 Harbour Dr. #3	
1.4 CITY-ST-ZIP	Naples, FL 34103	
2.1 TITLE	STD	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
2.2 NAME	Blumberg, Edward	
2.3 STREET ADDRESS	207 Harbour Dr. #4	
2.4 CITY-ST-ZIP	Naples, FL 34103	
3.1 TITLE		<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
3.2 NAME		
3.3 STREET ADDRESS	207 Harbour Dr. # 6	
3.4 CITY-ST-ZIP	34103	
4.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME		
4.3 STREET ADDRESS		
4.4 CITY-ST-ZIP		
5.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME		
5.3 STREET ADDRESS		
5.4 CITY-ST-ZIP		
6.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME		
6.3 STREET ADDRESS		
6.4 CITY-ST-ZIP		

14. I do 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

CR2E037 (9/96)