

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

**FILED**  
**Apr 20, 2005 8:00 am**  
**Secretary of State**

04-20-2005 90327 006 \*\*\*\*61.25



**DOCUMENT # 716051**

1. Entity Name

THE IMPERIAL CLUB OF NAPLES, INC.

Principal Place of Business

3399 GULF SHORE BLVD. N.  
NAPLES FL 34103

Mailing Address

3399 GULF SHORE BLVD. N.  
NAPLES FL 34103

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

1st MOORE

CR2E037 (10/04)

4. FEI Number

59-1377317

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

PECK, DANIEL D  
PECK & PECK  
5801 PELICAN BAY BLVD., SUITE 103  
NAPLES FL 34108

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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

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 D ☒ Delete  
NAME SILLS, DAN  
STREET ADDRESS 3399 GULF SHORE BLVD.N  
CITY-ST-ZIP NAPLES FL 34103

TITLE S ☐ Change ☐ Addition  
NAME DELUCA, ANNE  
STREET ADDRESS 3399 GULF SHORE BLVD. N  
CITY-ST-ZIP NAPLES, FL 34103

TITLE ~~D~~ ☐ Delete  
NAME EDEN, DON  
STREET ADDRESS 3399 GULF SHORE BLVD.N  
CITY-ST-ZIP NAPLES FL 34103

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE D ☒ Delete  
NAME DESCHANE, RICHARD L  
STREET ADDRESS 3399 GULF SHORE BLVD. N.  
CITY-ST-ZIP NAPLES FL

TITLE D ☐ Change ☐ Addition  
NAME HOUTON, JACK  
STREET ADDRESS 3399 GULF SHORE BLVD. N  
CITY-ST-ZIP NAPLES, FL 34103

TITLE D ☐ Delete  
NAME SCHILLING, GLEN  
STREET ADDRESS 3399 GULF SHORE BLVD N.  
CITY-ST-ZIP NAPLES FL 34103

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ~~D~~ ☒ Delete  
NAME BENNETT, TOM  
STREET ADDRESS 3399 GULF SHORE BLVD.N.  
CITY-ST-ZIP NAPLES FL

TITLE T ☐ Change ☐ Addition  
NAME LOYD, BILL  
STREET ADDRESS 3399 GULF SHORE BLVD. N  
CITY-ST-ZIP NAPLES, FL 34103

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

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:

*Don Eden* DON EDEN

4-8-05

239-435-4584

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #