## 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## FILED Apr 16, 2007 8:00 am Secretary of State

DOCUMENT # 716051  1. Entity Name THE IMPERIAL CLUB OF NAPLES, INC.				0	4-16-2007 90328 (	)12 ****61.25	
3399 GULF SHORE BLVD. N. 339		Mailing Address 3399 GULF SHORE BLVD NAPLES, FL 34103	3399 GULF SHORE BLVD. N.		8)(# 18/8) 8(8) (8) 8/8() 8/8() 8/8	(1) 110 110 110 110 110 110 110 110 110 1	
Principal Place of Business - No P.O. Box #     3. Mar		3. Mailing Address	Mailing Address				
		Suite, Apt. #, etc.	Suite, Apt. #, etc.		ng-NP CR2E0	37 (12/06)	
City & State		City & State			7	Applied For Not Applicable	
Zip	Country	Zip	Country	5. Certificate of St	atus Desired 🔲	\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent			Name	7. Name and Address of New Registered Agent			
PECK, DANIEL D PECK & PECK 5801 PELICAN BAY BLVD., SUITE 103				Street Address (P.O. Box Number is Not Acceptable)			
NAPLES, I							
			City	FL Zip Code			
	named entity submits this statement fo ions of registered agent.	the purpose of changing its re	gistered office or regi	istered agent, or both, in	the State of Florida. I am	i familiar with, and accept	
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE							
Filing Fee is \$61.25  Due by May 1, 2007  9. Election Campaign Trust Fund Contrib				<b>\$5.00</b> May Be Added to Fees		ck payable to entment of State	
10.	· OFFICERS AND DIF	ECTORS	11.	ADDITIONS/CHANG	ES TO OFFICERS AND D	IRECTORS IN 10	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D DELICA, AND 3399 GULFSHORE BLVD.N NAPLES, FL 34103	<b>™</b> Delete	NAME STREET ADDRESS 3	RESIDENT ESTO DE 399 GULFS APLES E		☐ Change 🔀 Addition	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	S EDEN, DON	ズ Delete				?	
	3399 GULFSHORE BLVD.N NAPLES, FL 34103		NAME STREET ADDRESS CITY-ST-ZIP	VANLES,	EN = 5HORE FL 3410	SCNA) Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<b>⊠</b> Delete	NAME STREET ADDRESS CITY-ST-ZIP  IIILE NAME STREET ADDRESS CITY-ST-ZIP	DON ED 399 GULT VAPLES, VICE PRE VOORLEY, M 399 GULF VAPLES, F	EN SHORE SIDENT DARY CA SHORE 6 L 34/03	Change ☐ Addition  Change ☐ Addition  Change ☐ Addition	
NAME STREET ADDRESS	NAPLES, FL 34103 D WORLEY, MARY CARROLL 3399 GULFSHORE BLVD. N.	☑ Delete ☑ Delete	NAME STREET ADDRESS CITY-ST-ZIP  IIILE NAME STREET ADDRESS CITY-ST-ZIP  ITTLE NAME STREET ADDRESS CITY-ST-ZIP  3 CITY-ST-ZIP 3 CITY-ST-ZIP 3	DON ED 399 GULF DORLEY, M 399 GULF 1996 GULF 1996 GULF 1996 GULF 1996 GULF	EN FL 3410 SIDENT DARY CA SHORE OF SHORE OF SHORE BE SHORE BE SHORE BE SHORE BE SHORE BE	SChange Addition  BLUS W  Change Addition  PROCC  BLUS W  Change MAddition  Change MAddition	
NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	NAPLES, FL 34103  D WORLEY, MARY CARROLL 3399 GULFSHORE BLVD. N. NAPLES, FL 34103  T LOYD, BILL 3399 GULF SHORE BLVD.N.		NAME STREET ADDRESS CITY-ST-ZIP  IIILE NAME STREET ADDRESS CITY-ST-ZIP  TITLE NAME STREET ADDRESS CITY-ST-ZIP  ITITLE NAME STREET ADDRESS CITY-ST-ZIP  ITITLE NAME STREET ADDRESS SCITY-ST-ZIP  ITITLE NAME STREET ADDRESS STREET ADDRESS STREET ADDRESS STREET ADDRESS STREET ADDRESS STREET ADDRESS	DON ED 399 GULF DORLEY, M 399 GULF ECRETARY 1CK SHK 399 GULF 1/4 PLES, ATRICIA 399 GULF ATRICIA 399 GULF	EN = SHORE FL 3410 SHORE E CODE SHORE BE SHORE SHORE BE SHORE SHORE BE SHORE SHORE BE SHORE SH	Change Addition  Change Addition	

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 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3-30-07

Daytime Phone #