

# 2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 716051

FILED  
Apr 25, 2011  
Secretary of State

**Entity Name:** THE IMPERIAL CLUB OF NAPLES, INC.

**Current Principal Place of Business:**

3399 GULF SHORE BLVD. N.  
NAPLES, FL 34103

**New Principal Place of Business:**

**Current Mailing Address:**

3399 GULF SHORE BLVD. N.  
NAPLES, FL 34103

**New Mailing Address:**

**FEI Number:** 59-1377317

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

PECK, DANIEL D  
PECK & PECK  
5801 PELICAN BAY BLVD., SUITE 103  
NAPLES, FL 34108 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: PD  
Name: DELUCA, SESTO  
Address: 3399 GULF SHORE BLVD. NORTH, #PHS  
City-St-Zip: NAPLES, FL 34103

Title: TD  
Name: EDEN, DON  
Address: 3399 GULF SHORE BLVD. NORTH, # 303  
City-St-Zip: NAPLES, FL 34103

Title: VPD  
Name: CHAMBERS, WALTER  
Address: 3399 GULF SHORE BLVD. NORTH, # 409  
City-St-Zip: NAPLES, FL 34103

Title: SD  
Name: DELOACH, CARY  
Address: 3399 GULF SHORE BLVD. NORTH, # 703  
City-St-Zip: NAPLES, FL 34103

Title: VPD  
Name: HENNIGAR, BARBARA  
Address: 3399 GULF SHORE BLVD. NORTH, # PHN  
City-St-Zip: NAPLES, FL 34103

I hereby 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 all other like empowered.

SIGNATURE: SESTO DELUCA

PD

04/25/2011

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

\_\_\_\_\_  
Date