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

SIGNATURE:

## Apr 07, 2005 8:00 am Secretary of State **DOCUMENT # 721328** 1. Entity Name 04-07-2005 90028 003 \*\*\*\*61.25 PIEDMONT CLUB, INC. Mailing Address Principal Place of Business 2335 9TH STREET N 2335 9TH STREET N 50034548 STE 505 NAPLES FL 34103 NAPLES FL 34103 3. Mailing Address 2. Principal Place of Business Suite, Apt. #, etc. Suite, Apt. #, etc. 1st MOORE CR2E037 (10/04) 4. FEI Number Applied For City & State City & State 59-1374785 Not Applicable Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent GULF VIEW PROPERTY MANAGEMENT INC Street Address (P.O. Box Number is Not Acceptable) 2335 9TH ST N SUITE 505 NAPLES FL 34103 City Zip Code FL 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 \$**.3**.7**3**.886.446.3375-1553 (多使物)计划3% Due By May 1, 2005 9. Election Campaign Financing **\$5.00** May Be Make Check Payable to Florida Department of State Trust Fund Contribution. Added to Fees ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 10. OFFICERS AND DIRECTORS 11. Addition TITLE TITLE Change X Dalata PD KESSINGER, DELIA NAME NAME Gelinas, Karen 4155 CRAYTON RD #108 STREET ADDRESS STREET ADDRESS 4155 Crayton Road #106 NAPLES FL 34103 CITY-ST-ZIP CITY-ST-ZIP Naples, FL 34103 .... STD Change ☐ Addition TITLE ☐ Delete TITEE MOOREHEAD, KRIS Moorhead, Kris NAME 4155 CRAYTON ROAD # 207 STREET ADDRESS STREET ADDRESS NAPLES FL 34103 CITY-ST-ZIP CITY-ST-ZIP VPD Detete TITLE VPD Change Addition BLOOMFIELD, ALAN NAME Hipes, Don 4155 CRAYTON RD #105 STREET ADDRESS STREET ADDRESS 4155 Crayton Road #202 NAPLES FL 34103 CITY-ST-7/P CITY-ST-7IP Naples, FL 34103 TITLE ☐ Change ☐ Addition TITLE ☐ Defete NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP . Change ☐ Addition TITLE ☐ Defete NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Change ☐ Delete TITLE Addition TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 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 of 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 life empowered.

FILED

239-403-7991

Davlime Phone #