

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 721328

FILED  
Apr 23, 2009  
Secretary of State

Entity Name: PIEDMONT CLUB, INC.

## Current Principal Place of Business:

2335 9TH STREET N  
STE 505  
NAPLES, FL 34103 US

## New Principal Place of Business:

## Current Mailing Address:

2335 9TH STREET N  
STE 505  
NAPLES, FL 34103 US

## New Mailing Address:

C/O MOORE PROPERTY MGMT  
745 12TH AVE S #AA  
NAPLES, FL 34102 US

FEI Number: 59-1374785

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

GULF VIEW PROPERTY MANAGEMENT INC  
2335 9TH ST N  
SUITE 505  
NAPLES, FL 34103 US

## Name and Address of New Registered Agent:

MOORE PROPERTY MANAGEMENT, LLC  
745 12TH AVE S . #AA  
NAPLES, FL 34102 US

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: JOHN MCGUSHIN

04/23/2009

Electronic Signature of Registered Agent

Date

## OFFICERS AND DIRECTORS:

Title: PD ( ) Delete  
Name: HANSEN, HOLLY  
Address: 4155 CRAYTON ROAD #208  
City-St-Zip: NAPLES, FL 34103

Title: VPD ( ) Delete  
Name: TRANI, ANTHONY  
Address: 4155 CRAYTON ROAD #206  
City-St-Zip: NAPLES, FL 34103

Title: STD ( ) Delete  
Name: SCHENKEL, DOUGLAS  
Address: 4155 CRAYTON ROAD #204  
City-St-Zip: NAPLES, FL 34103

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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 an address, with all other like empowered.

SIGNATURE: HOLLY HANSEN

P

04/23/2009

Electronic Signature of Signing Officer or Director

Date