

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
May 01, 2006 8:00 am
Secretary of State

05-01-2006 90342 017 ****61.25

DOCUMENT # 721358 1. Entity Name SEAGATE BEACH CLUB, INC.					
Principal Place of Business 5058 SEAHORSE AVE NAPLES, FL 34103 US			Mailing Address POST OFFICE BOX 770044 NAPLES, FL 34107 US		
2. Principal Place of Business 5291 SAND DOLLAR		3. Mailing Address SAME			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State NAPLES, FL		City & State NAPLES, FL		4. FEI Number 23-7320977	
Zip 34103		Country US		5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent LAFITTE, LAURA 5058 SEAHORSE AVE NAPLES, FL 34103		7. Name and Address of New Registered Agent Name: CHARLOTTE H. GROSS Street Address (P.O. Box Number is Not Acceptable): 5291 SAND DOLLAR LANE City: NAPLES FL Zip Code: 34103			
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: <u>Charlotte H. Gross</u> <u>CHARLOTTE H. GROSS (T)</u> <u>4/25/06</u> 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, 2006		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 NAME STREET ADDRESS CITY-ST-ZIP	D BUSER, DAVID 5187 STARFISH NAPLES, FL 34103	☒ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD BUSER, DAVID 5187 STARFISH NAPLES, FL 34103	☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P LEININGER, SALLY 5065 STARFISH AVE NAPLES, FL 34103	☒ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP MICK SULLIVAN 5150 SEAHORSE NAPLES, FL 34103	☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D RENFROE, NED 5088 SEASHELL AVE NAPLES, FL 34103	☒ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD DYKMAN, MARTHA 5040 SEASHELL NAPLES, FL 34103	☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T LAFITTE, LAURA 5058 SEAHORSE AVE NAPLES, FL 34103	☒ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD GROSS, CHARLOTTE 5291 SAND DOLLAR NAPLES, FL 34103	☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP BLACK, MATT 5064 SEASHELL NAPLES, FL 34103	☒ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	D WU, ERNIE 5194 SEAHORSE NAPLES, FL 34103	☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S CARLSON, JOHN 5106 SEAHORSE AVE NAPLES, FL 34103	☒ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	D COLGAN, ANN 5127 SEASHELL NAPLES, FL 34103	☐ 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: <u>Charlotte H. Gross</u> <u>CHARLOTTE H. GROSS</u> <u>4/25/06</u> <u>239-597-7218</u> SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #					

5251 Sand Dollar
NAPLES, FL 34103

D Jones, Crockett