

2006 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT**FILED**
Feb 02, 2006
Secretary of State

DOCUMENT# 722469

Entity Name: SOUTH CLUB, INC.

Current Principal Place of Business:SOUTH CLUB, INC.
105 3RD ST. S.
NAPLES, FL 34102 US**New Principal Place of Business:****Current Mailing Address:**1051 3RD ST. S.
#101
NAPLES, FL 34102 US**New Mailing Address:**

FEI Number: 59-2009310 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:ASHWORTH, JOHN
1051 3RD ST. S.
UNIT #101
NAPLES, FL 34102 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: STD (X) Delete
Name: HAWLEY, COLEEN
Address: 1051 3RD STREET S, #208
City-St-Zip: NAPLES, FL 34102Title: D () Delete
Name: WHIPKEY, KEN
Address: 322 CAUSEWAY DRIVE
City-St-Zip: WRIGHTSVILLE BEACH, NC 28480Title: PD () Delete
Name: WILSON, THOMAS
Address: 1051 3RD STREET S, #301
City-St-Zip: NAPLES, FL 34102Title: D () Delete
Name: ASHWORTH, JACK
Address: 1051 3RD STREET S, #101
City-St-Zip: NAPLES, FL 34102Title: D () Delete
Name: PRATT, ARTIE
Address: 1051 3RD ST S #304
City-St-Zip: NAPLES, FL 34102Title: D () Delete
Name: MCDERMOTT, JUNE
Address: 1051 THIRD ST. S. #303
City-St-Zip: NAPLES, FL 34120**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**Title: () Change () Addition
Name:
Address:
City-St-Zip:Title: D (X) Change () Addition
Name: WHIPKEY, KEN
Address: 322 CAUSEWAY DRIVE, SUITE 805
City-St-Zip: WRIGHTSVILLE BEACH, NC 28480-199Title: () Change () Addition
Name:
Address:
City-St-Zip: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 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: J. ASHWORTH

D

02/02/2006

Electronic Signature of Signing Officer or Director

Date