

**2006 NOT-FOR-PROFIT CORPORATION  
ANNUAL REPORT**

**FILED**  
**Feb 09, 2006 08:00 AM**  
**Secretary of State**

**DOCUMENT # 723391**

1. Entity Name  
**SUNSET OPTIMIST CLUB OF NAPLES, INC.**



Principal Place of Business  
**2750 GULF SHORE BLVD.  
#701  
NAPLES, FL 34102**

Mailing Address  
**930 GIRALDA COURT  
NAPLES, FL 34145**



02122006 No Chg-NP

CR2E037 (11/05)

4. FEI Number  
**23-7165756**

Applied For  
Not Applicable

5. Certificate of Status Desired

☒ **\$8.75** Additional  
Fee Required

**DO NOT WRITE IN THIS SPACE**

**6. Name and Address of Current Registered Agent**

**SCOTT, EDWARD  
930 GIRALDA CT.  
MARCO ISLAND, FL 34145**

**DO NOT WRITE  
IN THIS SPACE**

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

**Filing Fee is \$61.25  
Due by May 1, 2006**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$5.00** May Be  
Added to Fees

**10. OFFICERS AND DIRECTORS**

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

**D  
HILL, CHRIS  
5980 GREEN BLVD.  
NAPLES, FL 34116**

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

**PD  
GAYLE, STEPHEN E  
5429 22ND AVE SW  
NAPLES, FL 34116**

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

**D  
SCOTT, EDWARD  
930 GIRALDA CT.  
MARCO ISLAND, FL 34145**

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

000000428226  
02/21/06-80039-013 70.00

**DO NOT WRITE  
IN THIS SPACE**

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 life empowered.

SIGNATURE: Stephen E. Gayle Stephen E Gayle 2-12-06 239-348-3933  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #