## 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## **DOCUMENT#726628**

Entity Name: SWAN LAKE CLUB, INC.

FILED Apr 30, 2008 Secretary of State

Current Principal Place of Business:	New Principal Place of Business:
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4306 ARNOLD AVENUE NAPLES, FL 34104

**Current Mailing Address: New Mailing Address:** 

P.O. BOX 110339 NAPLES, FL 34108

FEI Number: 59-1713212 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

KUETER, BEVERLY C/O SUNBURST MGMT. 4306 ARNOLD AVE NAPLES, FL 34104 US

**OFFICERS AND DIRECTORS:** 

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:

Date

## Electronic Signature of Registered Agent

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

DVP () Delete (X) Change ( ) Addition

BOTKIN, TOM BOTKIN, TOM Name: Name: 4180 CRAYTON RD. #E7 Address: 4180 CRAYTON RD. #E7 Address: City-St-Zip: NAPLES, FL 34103 City-St-Zip: NAPLES, FL 34103

(X) Change ( ) Addition Title: DP () Delete Title: DAVIES, PATTY Name: KECK, CHARLES Name:

Address: 4160 CRAYTON RD. #A1 Address: 4160 CRAYTON RD. #A7 City-St-Zip: NAPLES, FL 34103 City-St-Zip: NAPLES, FL 34103

Title: () Delete Title: (X) Change ( ) Addition PAVLISKA, JANET Name: STEINBERG, MORRIS Name:

4150 CRAYTON RD. #B2 Address: Address: 4170 CRAYTON RD. #C1 City-St-Zip: NAPLES, FL 34103 City-St-Zip: NAPLES, FL 34103

Title: ( ) Delete Title: DS (X) Change ( ) Addition

Name: O'LEARY, JACK Name: O'LEARY, JACK 4180 CRAYTON RD. #E8 4180 CRAYTON RD. #E8 Address: Address: City-St-Zip: NAPLES, FL 34103 City-St-Zip: NAPLES, FL 34103

Title: DS () Delete Title: (X) Change ( ) Addition

FRENCH, EILEEN FRENCH, EILEEN Name: Name: 4150 CRAYTON RD. #B6 4150 CRAYTON RD. #B6 Address: Address: NAPLES, FL 34103 City-St-Zip: NAPLES, FL 34103 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: EILEEN FRENCH **PRES** 04/30/2008