## 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## **DOCUMENT# 727457**

Entity Name: LA MAISON CLUB, INC.

Apr 15, 2009 Secretary of State

Current Principal Place of Business:	New Principal Place of Business:
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3450 GULF SHORE BL. NORTH NAPLES, FL 34103

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

3450 GULF SHORE BL. NORTH NAPLES, FL 34103

FEI Number: 59-1417922 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:

ANDREWS, KIRK 3450 GULF SHORE BLVD APT 104 NAPLES, FL 34103

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:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

() Delete (X) Change ( ) Addition

ANDREWS, KIRK FRANZ, LINDA Name: Name: Address: 3450 GULF SHORE BOULEVARD NORTH Address: 3450 GULF SHORE BLVD. NO. #W-407

City-St-Zip: NAPLES, FL City-St-Zip: NAPLES, FL 34103

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

Name: JACOBI, MARY I Name: NATALE, BEATRICE Address: 3450 GULF SHORE BL. NORTH Address: 3450 GULF SHORE BLVD. NO. #W-208

City-St-Zip:

NAPLES, FL 34103 US City-St-Zip: NAPLES, FL 34103 US

Title: () Delete Title: (X) Change ( ) Addition HOLT, SHELLEY Name: BOYER, JEANNE Name:

3450 GULF SHORE BLVD. NORTH Address: Address:

3450 GULF SHORE BLVD. NO. #N-205

City-St-Zip: NAPLES, FL 34103 City-St-Zip: NAPLES, FL 34103

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

JOHNSON, JUDY Name: BLADEL, GRAEME Name:

3450 GULF SHORE BLVD. NORTH 3450 GULF SHORE BLVD. NO. #W-310 Address: Address:

City-St-Zip: NAPLES, FL 34103 City-St-Zip: NAPLES, FL 34103

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

WICKLANDER, DOUG WICKLANDER, DOUG Name: Name:

3450 GULF SHORE BLVD. NO. #S-212 3450 GULF SHORE BL. NORTH Address: Address:

NAPLES, FL 34103 US NAPLES, FL 34103 US City-St-Zip: 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: LINDA FRANZ Ρ 04/15/2009