


2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 22, 2007 08:00 AM
Secretary of State

DOCUMENT # 738954


1. Entity Name
NAPLES LAND YACHT HARBOR, INC.



Principal Place of Business
**2801 PALM ST
 NAPLES, FL 34112**

Mailing Address
**2801 PALM ST
 NAPLES, FL 34112**

DO NOT WRITE IN THIS SPACE



01122007 No Chg-NP CR2E037 (4/06)

4. FEI Number
59-1683568

Applied For
 Not Applicable

5. Certificate of Status Desired **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

**ADAMS, JOSEPH
 BANK OF AMERICA CENTER
 4501 TAMiami TRAIL N, SUITE 214
 NAPLES, FL 34103**

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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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

Signature, typed or printed name of registered agent and title if applicable

**Filing Fee is \$61.25
 Due by May 1, 2007**

9. Election Campaign Financing Trust Fund Contribution. **\$5.00 May Be Added to Fees**


U00000598750
 01/24/07-80088-011 61.25

10. OFFICERS AND DIRECTORS

TITLE	P
NAME	SWARTWOOD, HERBERT A
STREET ADDRESS	25 GROUPEr DR
CITY-ST-ZIP	NAPLES, FL 34112
TITLE	VP
NAME	VETTER, DONALD
STREET ADDRESS	102 PIER D
CITY-ST-ZIP	NAPLES, FL 34112
TITLE	D
NAME	BITTENBENDER, GENE
STREET ADDRESS	103 PIER B
CITY-ST-ZIP	NAPLES, FL 34112
TITLE	D
NAME	MICHAUD, ARMAND
STREET ADDRESS	222 PIER E
CITY-ST-ZIP	NAPLES, FL 34112
TITLE	T
NAME	FLAHERTY, JOHN F
STREET ADDRESS	318 PIER E
CITY-ST-ZIP	NAPLES, FL 34112
TITLE	S
NAME	BUTLER, MARY
STREET ADDRESS	112 PIER B
CITY-ST-ZIP	NAPLES, FL 34112

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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:  **John F. Flaherty, Treasurer 1/18/07 239-774-5484**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #