## 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**DOCUMENT# 740845** 

Entity Name: ESPLANADE CLUB, INC.

FILED Mar 16, 2009 Secretary of State

Current Principal Place of Business:			New Principal Place of Business:	
4551 GULF NAPLES, F	FSHORE BLV FL 34103	DN		
Current Mailing Address:			New Mailing Address:	
4551 GULF NAPLES, F	FSHORE BLV FL 34103	DN		
FEI Number: 59-1790731 FEI Number Applied For ( )			FEI Number Not App	licable ( ) Certificate of Status Desired ( )
Name and	Address of	Current Registered Agent:	Name and	Address of New Registered Agent:
DUARTE, 4551 GULI NAPLES, F	FSHORE BOL	JLEVARD NORTH JS		
	named entity e of Florida.	submits this statement for the p	urpose of changing i	its registered office or registered agent, or both,
SIGNATUR				
	Electro	nic Signature of Registered Age	nt	Date
OFFICERS AND DIRECTORS:			ADDITION	IS/CHANGES TO OFFICERS AND DIRECTOR
Title: Name: Address: City-St-Zip:	DUCH, EDWA	ORE BOULEVARD NORTH #PH8	Title: Name: Address: City-St-Zip:	()Change ()Addition
Title: Name: Address: City-St-Zip:	TOUPIN, CAR	IORE BLVD N #1800	Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition
Title: Name: Address: City-St-Zip:	LEWIS, RICHA	IORE BLVD N. #804	Title: Name: Address: City-St-Zip:	T/D (X) Change ( ) Addition KOENIG, DAVID 4551 GULF SHORE BLVD N. #606 NAPLES, FL 34103
Title: Name: Address: City-St-Zip:	GOLLER, DAV	ORE BOULEVARD N. #201	Title: Name: Address: City-St-Zip:	() Change () Addition
Title: Name: Address: City-St-Zip:	BA;LL, DARRE	HORE BLVD N. #802	Title: Name: Address: City-St-Zip:	D (X) Change ( ) Addition BALL, DARRELL 4551 GULF SHORE BLVD N. #802 NAPLES, FL 34103
Title: Name: Address: City-St-Zip:	KOENIG, DAV	ORE BOULEVARD N. #606	Title: Name: Address: City-St-Zip:	D (X) Change ( ) Addition LEWIS, RICHARD 4551 GULFSHORE BOULEVARD N. #804 NAPLES, FL 34103

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: CARLOS DUARTE G.MG 03/16/2009