

# **2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 743989

**FILED**  
**Feb 22, 2012**  
**Secretary of State**

**Entity Name:** PURDUE CLUB OF SOUTHWEST FLORIDA, INC.

**Current Principal Place of Business:**

1465 12TH ST. NORTH  
NAPLES, FL 341025229 US

**New Principal Place of Business:**

1520 ROYAL PALM SQUARE BLVD, #320  
FORT MYERS, FL 33919 US

**Current Mailing Address:**

1465 12TH ST. NORTH  
NAPLES, FL 341025229 US

**New Mailing Address:**

1520 ROYAL PALM SQUARE BLVD, #320  
FORT MYERS, FL 33919 US

**FEI Number:** 59-2803710

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

WARD R. GOTT  
1465 12TH ST NORTH  
NAPLES, FL 341025229 US

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

OWENS, DAVE  
1520 ROYAL PALM SQUARE BLVD, #320  
FORT MYERS, FL 33919 US

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: DAVE OWENS

02/22/2012

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: PRES  
Name: BARRETT, FRANK  
Address: 20659 DENNISPORT LN  
City-St-Zip: N. FT. MYERS, FL 33917 US

Title: TSR  
Name: OWENS, DAVE A  
Address: 1520 ROYAL PALM SQUARE BLVD, #320  
City-St-Zip: FORT MYERS, FL 33919 US

I hereby 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 all other like empowered.

SIGNATURE: DAVE OWENS

TSR

02/22/2012

Electronic Signature of Signing Officer or Director

Date