2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 748559

FILED Mar 09, 2006 Secretary of State

Entity Name: CAPE CORAL SHRINE CLUB HOLDING COMPANY, INC.

Current Principal Place of Business: New Principal Place of Business: 360 SANTA BARBARA BLVD 360 SANTA BARBARA BLVD CAPE CORAL, FL 33914 CAPE CORAL, FL 33991 **Current Mailing Address: New Mailing Address:** PO BOX 152318 CAPE CORAL, FL 33915 US FEI Number: 58-1372301 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: NAPOLI, JOHN P 3622 SE 3RD PLACE CAPE CORAL,, FL 33904 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: Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Delete () Change () Addition OST, RUSTY Name: Name: 4211 SW 13TH AVE Address: Address: City-St-Zip: CAPE CORAL, FL 33914 City-St-Zip: Title: Title: () Delete () Change () Addition DISBROW, DONALD J Name: Name: Address: 2235 SE 27TH TERR Address: City-St-Zip: CAPE CORAL, FL 33904 City-St-Zip: Title: () Delete Title: () Change () Addition RICHARDSON, ROY Name: Name: 5917 LITTLESTONE CT Address: Address: City-St-Zip: N FT MYERS, FL 33903 City-St-Zip: Title: () Delete Title: (X) Change () Addition Name: COTTON, EDWIM Name: WALTHER, CHARLES 1410 SW 50TH ST Address: 5622 DEAUVILLE CT Address: City-St-Zip: CAPE CORAL, FL 33904 City-St-Zip: CAPE CORAL, FL 33914 Title: () Delete Title: () Change () Addition NAPOLI, JOHN P Name: Name: 3622 SE 3RD PLACE Address: Address: City-St-Zip: CAPE CORAL, FL 33904 City-St-Zip: Title: () Delete Title: (X) Change () Addition CROSSLAND, HARRISON CROSSLAND, HARRISON Name: Name: Address: 3617 SE 5TH COURT Address: 3617 SE 5TH COURT CAPE CORAL, FL 33904 CAPE CORAL, FL 33904 City-St-Zip: City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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: JOHN P NAPOLI T 03/09/2006