

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 748559

FILED
Mar 19, 2008
Secretary of State

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

Current Principal Place of Business:

360 SANTA BARBARA BLVD
CAPE CORAL, FL 33991 US

New Principal Place of Business:

Current Mailing Address:

PO BOX 152318
CAPE CORAL, FL 33915 US

New Mailing Address:

FEI Number: 23-7326968

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

NAPOLI, JOHN P
3622 SE 3RD PLACE
CAPE CORAL,, FL 33904 US

Name and Address of New Registered Agent:

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:

Title: P () Delete
Name: OST, RUSTY
Address: 4211 SW 13TH AVE
City-St-Zip: CAPE CORAL, FL 33914

Title: D () Delete
Name: DISBROW, DONALD J
Address: 2235 SE 27TH TERR
City-St-Zip: CAPE CORAL, FL 33904

Title: S () Delete
Name: RICHARDSON, ROY
Address: 5917 LITTLESTONE CT
City-St-Zip: N FT MYERS, FL 33903

Title: D () Delete
Name: WALTHER, CHARLES
Address: 1410 SW 50TH ST
City-St-Zip: CAPE CORAL, FL 33914

Title: T () Delete
Name: NAPOLI, JOHN P
Address: 3622 SE 3RD PLACE
City-St-Zip: CAPE CORAL, FL 33904

Title: D () Delete
Name: CROSSLAND, HARRISON
Address: 3617 SE 5TH COURT
City-St-Zip: CAPE CORAL, FL 33904

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: OST, RUSTY
Address: 4211 SW 13TH AVE
City-St-Zip: CAPE CORAL, FL 33914

Title: P (X) Change () Addition
Name: THOMAS, HALE J
Address: 2520 NW 4TH ST
City-St-Zip: CAPE CORAL, FL 33993

Title: D (X) Change () Addition
Name: BURNETTE, WADE
Address: 5243 WISTERIA CT
City-St-Zip: CAPE CORAL, FL 33990

Title: S (X) Change () Addition
Name: WALTHER, CHARLES
Address: 1410 SW 50TH ST
City-St-Zip: CAPE CORAL, FL 33914

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
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: JOHN P. NAPOLI

T

03/19/2008

Electronic Signature of Signing Officer or Director

Date