

2004 LIMITED PARTNERSHIP ANNUAL REPORT
Due By May 1, 2004

FILED
Jun 04, 2004 08:00 AM
Secretary of State

DOCUMENT # A97000001661 1. Entity Name CLUB NAPLES, LTD.					
Principal Place of Business 3180 BECK BLVD. NAPLES, FL 34114			Mailing Address 333 WASHINGTON AVE. N. SUITE 200 MINNEAPOLIS, MN 55401		
2. Principal Place of Business		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State			
Zip	Country	Zip	Country		
6. Name and Address of Current Registered Agent				7. Name and Address of New Registered Agent	
GREGORY, C. NEIL 850 PARK SHORE DRIVE TRIANON CENTER - 3RD FLOOR NAPLES, FL 34103				Name	
				Street Address (P.O. Box Number is Not Acceptable)	
				City	
				FL Zip Code	
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 _____ DATE _____ Signature, typed or printed name of registered agent and title if applicable					
9. Capital Contributions as Shown on record.		\$3,000.00		10. Amount of Capital Contributions in FLORIDA to date.	
A GENERAL PARTNER THAT IS A BUSINESS ENTITY MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE. NOTE: General Partners MAY NOT be changed on the form; an amendment must be filed to change a general partner.					
12. GENERAL PARTNER INFORMATION			13. ADDRESS CHANGES ONLY		
DOCUMENT #	NAME		STREET ADDRESS		
NAME	NELSON, GEORGE N		CITY - ST - ZIP		
STREET ADDRESS	333 WASHINGTON AVE. N. SUITE 200		STREET ADDRESS		
CITY - ST - ZIP	MINNEAPOLIS, MN 55401		CITY - ST - ZIP		
DOCUMENT #			STREET ADDRESS		
NAME			CITY - ST - ZIP		
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14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(b), Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a General Partner of the limited partnership or the receiver or trustee empowered to execute this report as required by Chapter 620, Florida Statutes.					
SIGNATURE: _____			7/14/04 612-373-9847 Date Telephone #		
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER George N. Nelson, Jr.					



04142004 Chg-LP CR2E003 (10/03)

4. FEI Number 59-3461063 Applied For Not Applicable

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

STAPLE CHECK HERE