FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # L99000005551

1. Entity Name

NAPLES BOAT CLUB LLC

FILED

02 OCT 25 PM 2:29

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DO NOT WRITE IN THIS SPACE

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	3. Mailing Address
Naples Boat Club	Naples Boat Club
Suite, Apt. #, etc.: 909 10th St So., #101	Suite, Apt. #, etc.: 909 10th St So., #101
City & State: Naples, FL	City & State: Naples, FL
Zip: 34102 Country: USA	Zip: 34102 Country: USA

4. FEI Number: 59-3595728 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☒ $8.75 Additional Fee Required

DO NOT WRITE IN THIS SPACE

7. Name and Address of Current Registered Agent

Name: John C. Swanson

Street Address (P.O. Box Number is Not Acceptable): 909 10th Street So., #101

City: Naples FL Zip Code: 34102

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.

SIGNATURE: John C. Swanson MGR

Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

9. This corporation is eligible to satisfy its intangible Tax filing requirement and elects to do so. (See criteria on back) ☐

January 1 - May 1 Fee is $150.00
After May 1 Fee is $550.00
Amended UBR is $61.25
Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution. ☐ $5.00 May Be Added to Fees

11. OFFICERS AND DIRECTORS

TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	MGR RUFF, EDWARD J. 1431 Railhead Blvd. Naples, FL 34110
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	MGR WETTERAU, TED C. 211 N. Broadway, Ste 3600 St. Louis, MO 63102-2750
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	MGR HEIMBURGER, G. FRED 211 N. Broadway, Ste 3600 St. Louis, MO 63102-2750
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	MGR GOEBEL, JOHN C. 211 N. Broadway, Ste 3600 St. Louis, MO 63102-2750
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	MGR SWANSON, JOHN C. 15600 Old Route 41 Naples, FL 34110
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	

TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	10/24/02 01019 005 *58.75
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TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	10/25 mst

13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 607, Florida Statutes; and that my name appears in Block 11 or on an attachment with an address with all blanks like empowered.

239-430-4994

SIGNATURE: John C. Swanson MGR 10/11/02

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034B (12/01)