

# 2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N00000001284

FILED  
Apr 14, 2005  
Secretary of State

**Entity Name:** THE DRAGON CLUB OF SOUTHWEST FLORIDA, INC.

**Current Principal Place of Business:**

4724 VINCENNES BLVD  
CAPE CORAL, FL 33904

**New Principal Place of Business:**

**Current Mailing Address:**

4724 VINCENNES BLVD  
CAPE CORAL, FL 33904

**New Mailing Address:**

**FEI Number:** 65-0985985

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

SHIPP, THOAMS E JR  
4223 DEL PRADO BLVD  
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: PDBM ( ) Delete  
Name: DOUGHERTY, BERNARD S  
Address: 4724 VINCENNES BLVD  
City-St-Zip: CAPE CORAL, FL 33904

Title: VPD ( ) Delete  
Name: SMOCK, BYRON  
Address: 1470 ROYAL PALM SQ BLVD  
City-St-Zip: FORT MYERS, FL 33919

Title: TDBM ( ) Delete  
Name: DOUGHERTY, YUKI  
Address: 4724 VINCENNES BLVD  
City-St-Zip: CAPE CORAL, FL 33904

Title: VPD ( ) Delete  
Name: SHIPP, THOMAS  
Address: 4223 DEL PRADO BLVD  
City-St-Zip: CAPE CORAL, FL 33904

Title: SDBM ( ) Delete  
Name: DOUGHERTY, VERELLA  
Address: 3424 AVACADO DRIVE  
City-St-Zip: FORT MYERS, FL 33901

Title: D ( ) Delete  
Name: SMOCK, KAREN  
Address: 1470 ROYAL PARL SQ BLVD  
City-St-Zip: FORT MYERS, FL 33919

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: PDBM (X) Change ( ) Addition  
Name: DOUGHERTY, BERNARD J  
Address: 4724 VINCENNES BLVD  
City-St-Zip: CAPE CORAL, FL 33904

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

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

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

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 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 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: BERNARD J DOUGHERTY

PDBM

04/14/2005

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date