

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N00000001284

FILED
Apr 19, 2006
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 J
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: () 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
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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 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: BERNARD J. DOUGHERTY

PRES

04/19/2006

Electronic Signature of Signing Officer or Director

Date