

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED

Jan 29, 2004 08:00 AM
Secretary of State

DOCUMENT # N00000005045

1. Entity Name

NORTH FT. MYERS TRAVEL CLUB, INC.



Principal Place of Business

3474 17TH ST
SARASOTA FL 34235

Mailing Address

3474 17TH ST
SARASOTA FL 34235

2. Principal Place of Business

3. Mailing Address



MOORE

CR2E037 (11/03)

4. FEI Number

65-0939808

Applied For

Not Applicable

5. Certificate of Status Desired



\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

FERGUSON, ADRIAN L SR
3474 17TH ST
SARASOTA FL 34235

7. Name and Address of New Registered Agent

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

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW: FEE IS \$61.25
Due By May 1, 2004

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

Make Check Payable to
Florida Department of State

10. OFFICERS AND DIRECTORS

TITLE PTD
NAME FERGUSON, ADRIAN L SR ☐ Delete
STREET ADDRESS 3474 17TH ST
CITY- ST- ZIP SARASOTA FL 34235

TITLE VSD
NAME FERGUSON, ADRIAN L JR ☐ Delete
STREET ADDRESS 3474 17TH ST
CITY- ST- ZIP SARASOTA FL 34235

TITLE T
NAME HYMAN, CHERYL A ☐ Delete
STREET ADDRESS 4411 PARNELL DR
CITY- ST- ZIP SARASOTA FL 34232

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY- ST- ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY- ST- ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY- ST- ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10.

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS 000000020583
CITY- ST- ZIP 01/29/04-80072-015 70.00

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY- ST- ZIP

TITLE ☐ Change ☐ Addition
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CITY- ST- ZIP

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NAME
STREET ADDRESS
CITY- ST- ZIP

12. 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 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE

ADRIAN L. FERGUSON SR. 01/24/2004 953-7988 E-106

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #