2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 18, 2007
Secretary of State

DOCUMENT# N01000004319

Entity Name: HUNGARIAN-AMERICAN CLUB OF SOUTHWEST FLORIDA, INC.

Current Principal Place of Business:

6590 HUNTINGTON LAKES CIRCLE
#104
NAPLES, FL 34119 US

New Principal Place of Business:

Current Mailing Address:

6590 HUNTINGTON LAKES CIRCLE
#104
NAPLES, FL 34119 US

New Mailing Address:

FEI Number: 03-0413134 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

DOBOS, FRANK E
6590 HUNTINGTON LAKES CIRCLE
#104
NAPLES, FL 34119 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: D ( ) Delete
Name: DOBOS, FRANK
Address: 6590 HUNTINGTON LAKES CIRCLE
City-St-Zip: NAPLES, FL 34119

Title: D ( ) Delete
Name: GRAEBNER, JOSEPH
Address: 306 SAWGRASS CT
City-St-Zip: NAPLES, FL 34110

Title: TD ( ) Delete
Name: HABLY, EDWARD
Address: 831 100 AVE N
City-St-Zip: NAPLES, FL 34108

Title: D ( ) Delete
Name: KODA, JULIA
Address: 1238 14TH AVENUE N.
City-St-Zip: NAPLES, FL 34102

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
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: EDWARD HABLY TD 02/18/2007

Electronic Signature of Signing Officer or Director — Date