

2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# N01000005288

FILED
Apr 29, 2003
Secretary of State

Entity Name: NAPLES SPORTSMEN'S CLUB, INC.

Current Principal Place of Business:

NAPLES SPORTS PARK
CR 951
NAPLES, FL 34113

New Principal Place of Business:

Current Mailing Address:

2600 GOLDEN GATE PARKWAY
C/O D. E. BAIRD
NAPLES, FL 34105

New Mailing Address:

FEI Number: FEI Number Applied For () FEI Number Not Applicable (X) Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BAIRD, DOUGLAS E
2600 GOLDEN GATE PARKWAY
NAPLES, FL 34105

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: P/D () Delete
Name: URBANIK, MICHAEL
Address: 4406 ARNOLD AVE.
City-St-Zip: NAPLES, FL 34104

Title: S/D () Delete
Name: URBANIK, MICHAEL R
Address: 4406 ARNOLD AVE
City-St-Zip: NAPLES, FL 34104

Title: T/D () Delete
Name: URBANIK, MIKE
Address: 4406 ARNOLD AVE
City-St-Zip: NAPLES, FL 34104

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:

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: MICHAEL URBANIK

P/D

04/29/2003

Electronic Signature of Signing Officer or Director

Date