

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01000007490

FILED
Jul 30, 2007
Secretary of State

Entity Name: NAPLES BASEBALL CLUB, INC.

Current Principal Place of Business:

4890 PALMETTO WOODS DRIVE
NAPLES, FL 34119 US

New Principal Place of Business:

Current Mailing Address:

4890 PALMETTO WOODS DRIVE
NAPLES, FL 34119 US

New Mailing Address:

FEI Number: 59-3752731 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

TURNER, RICK
4890 PALMETTO DRIVE
NAPLES, FL 341019 US

Name and Address of New Registered Agent:

TURNER, RICK
4890 PALMETTO DRIVE
NAPLES, FL 34119 US

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: _____

07/30/2007

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: TURNER, RICK
Address: 4890 PALMETTO WOODS DRIVE
City-St-Zip: NAPLES, FL 34119

Title: VP () Delete
Name: PATTON, DOUG
Address: 1135 HOLIDAY LANE
City-St-Zip: NAPLES, FL 34104 US

Title: ST () Delete
Name: ZECH, BRIAN
Address: 4412 LORRAINE AVENUE
City-St-Zip: NAPLES, FL 34104

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: TURNER, RICK
Address: 4890 PALMETTO WOODS DRIVE
City-St-Zip: NAPLES, FL 34119 US

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

Title: ST (X) Change () Addition
Name: ZECH, BRIAN
Address: 4412 LORRAINE AVENUE
City-St-Zip: NAPLES, FL 34104 US

I hereby certify that the information supplied with this filing does not qualify 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: DOUG PATTON

VP

07/30/2007

Electronic Signature of Signing Officer or Director

Date