


2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 28, 2005 8:00 am
Secretary of State

04-28-2005 90150 033 ****61.25

DOCUMENT # N02000006817	
1. Entity Name PORT OF THE ISLANDS GUN CLUB, INC.	

Principal Place of Business 7575 PELICAN BAY BOULEVARD SUITE 201 NAPLES, FL 34108	Mailing Address 7575 PELICAN BAY BOULEVARD SUITE 201 NAPLES, FL 34108
---	---

2. Principal Place of Business 12425 Union Road	3. Mailing Address 12425 Union Road
Suite, Apt. #, etc.	Suite, Apt. #, etc.

City & State Naples, FL	City & State Naples, FL
-----------------------------------	-----------------------------------

Zip 34114	Country Collier	Zip 34114	Country Collier
---------------------	---------------------------	---------------------	---------------------------

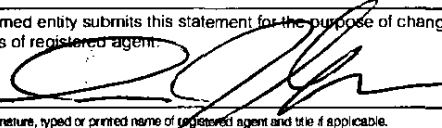
04222005 Chg-NP CR2E037 (10/03)

4. FEI Number 13-4208962	Applied For <input type="checkbox"/> Not Applicable
------------------------------------	--

5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
---	---------------------------------------

6. Name and Address of Current Registered Agent
GASAWAY, DENNIS J 254 NEWPORT DRIVE, UNIT 401 NAPLES, FL 34114

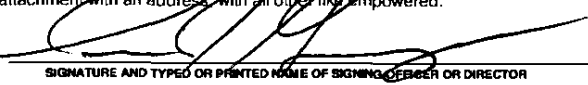
7. Name and Address of New Registered Agent
Name
Street Address (P.O. Box Number is Not Acceptable)
City
FL Zip Code

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 	DATE 4/22/05
(NOTE: Registered Agent signature required when registering)	

Filing Fee is \$61.25 Due by May 1, 2005	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>	\$5.00 May Be Added to Fees	Make check payable to Florida Department of State
---	---	------------------------------------	--

10. OFFICERS AND DIRECTORS	
TITLE	D <input checked="" type="checkbox"/> Delete
NAME	CAMERON, WILLIAM MR
STREET ADDRESS	410 PALM CIRCLE
CITY-ST-ZIP	WEST NAPLES, FL 33940
TITLE	D <input checked="" type="checkbox"/> Delete
NAME	KENNEDY, JAMES M MR
STREET ADDRESS	147 W. CHURCH STREET
CITY-ST-ZIP	NEWARK, OH 43058
TITLE	D <input checked="" type="checkbox"/> Delete
NAME	MCCUMBER, REBECCA MS
STREET ADDRESS	515 W. KELLAR PKWY
CITY-ST-ZIP	PEORIA, IL 61614
TITLE	D <input checked="" type="checkbox"/> Delete
NAME	NACE, JAMES L MR
STREET ADDRESS	7575 PELICAN BAY BOULEVARD #201
CITY-ST-ZIP	NAPLES, FL 34108
TITLE	D <input checked="" type="checkbox"/> Delete
NAME	ZOLLINGER FRED, AMES H JR
STREET ADDRESS	6370 MT PLEASANT ST., NW
CITY-ST-ZIP	NORTH CANTON, OH 44720
TITLE	<input type="checkbox"/> Delete
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE	D <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Dennis Gasaway, Dennis J. Mr.
STREET ADDRESS	254 Newport Drive, Unit 401
CITY-ST-ZIP	Naples, FL 34114
TITLE	D <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Rehn, Belinda F., Ms.
STREET ADDRESS	254 Newport Drive, Unit 401
CITY-ST-ZIP	Naples, FL 34114
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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: 	DATE 4/22/05 239 642-2999
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR	