

**2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

**FILED  
Mar 09, 2007  
Secretary of State**

DOCUMENT# N04000009047

Entity Name: UNIVERSITY OF MICHIGAN CLUB OF SOUTHWEST FLORIDA, INC.

**Current Principal Place of Business:**

5811 PELICAN BAY BLVD., STE. 600  
NAPLES, FL 34108

**New Principal Place of Business:**

**Current Mailing Address:**

5811 PELICAN BAY BLVD., STE. 600  
NAPLES, FL 34108

**New Mailing Address:**

FEI Number: 41-2154883      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

STOMMEL, ROBERT  
5811 PELICAN BAY BLVD., STE. 600  
NAPLES, FL 34108      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: BENSON, RICHARD  
Address: 6557 RIDGEWOOD DR.  
City-St-Zip: NAPLES, FL 34108

Title: D      ( ) Delete  
Name: BURD, ELLIOTT  
Address: 4284 LONGSHORE WAY S.  
City-St-Zip: NAPLES, FL 34119

Title: DT      ( ) Delete  
Name: SHEVIN, KENNETH  
Address: 2016 MISSION DRIVE  
City-St-Zip: NAPLES, FL 34109

Title: D      ( ) Delete  
Name: DANIELS, R. MAX  
Address: 461 FOX DEN CIRCLE  
City-St-Zip: NAPLES, FL 34104

Title: DS      ( ) Delete  
Name: MOORE, EARL  
Address: 1330 MANDARIN ROAD  
City-St-Zip: NAPLES, FL 34102

Title: PD      ( ) Delete  
Name: HANSON, MARGARET  
Address: 800 AMBIANCE CIR., #102  
City-St-Zip: NAPLES, FL 34108

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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

Title: D      (X) Change ( ) Addition  
Name: BRUST, ED  
Address: 80 SOUTHPORT COVE  
City-St-Zip: BONITA SPRINGS, FL 34134

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

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

Title: DS      (X) Change ( ) Addition  
Name: SLEBODNIK, KATHLEEN  
Address: 32 PEBBLE BEACH BLVD.  
City-St-Zip: NAPLES, FL 34113

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: MARGARET HANSON

PD

03/09/2007

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date