2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 25, 2011
Secretary of State

DOCUMENT# N07000001117

Entity Name: NAPLES PRESS CLUB, INCORPORATED

Current Principal Place of Business:

2390 TAMIAMI TR. N
SUITE 210
NAPLES, FL 34103 US

New Principal Place of Business:

Current Mailing Address:

2390 TAMIAMI TR. N
SUITE 210
NAPLES, FL 34103 US

New Mailing Address:

FEI Number: 32-0188687 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

KINDSVATER, CONNIE S
445 DOCKSIDE DRIVE
704
NAPLES, FL 34110 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: P
Name: FIALA, DONNA
Address: 4463 LAKEWOOD BLVD
City-St-Zip: NAPLES, FL 34112 US

Title: VP-1
Name: PHILIP, JASON K
Address: 12823 VALEWOOD DR
City-St-Zip: NAPLES, FL 34119 US

Title: T
Name: KINDSVATER, CONNIE S
Address: 445 DOCKSIDE DR # 704
City-St-Zip: NAPLES, FL 34110 US

Title: S
Name: LENDER, SANDY
Address: 4528 SE 5TH PLACE, UNIT 8
City-St-Zip: CAPE CORAL, FL 33904 US

Title: VP-2
Name: WACHSMITH, PAUL
Address: 25400 ALICANTE DR
City-St-Zip: BONITA SPRINGS, FL 34134 US

Title: D
Name: SAUNDERS, RHONA
Address: 3770 PARKVIEW WAY
City-St-Zip: NAPLES, FL 34103 US

I hereby 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 all other like empowered.

SIGNATURE: CONNIE S. KINDSVATER T 02/25/2011

Electronic Signature of Signing Officer or Director — Date