

# 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

**FILED**  
**Feb 07, 2008 8:00 am**  
**Secretary of State**

02-07-2008 90016 041 \*\*\*\*61.25

|                                                                                                                                                                                                                               |         |                                                                                                                                         |         |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------|-----------------------------------------------------------------------------------------------------------------------------------------|---------|
| <b>DOCUMENT # N08795</b>                                                                                                                                                                                                      |         |                                                        |         |
| 1. Entity Name<br><b>YALE CLUB OF SOUTHWEST FLORIDA, INC.</b>                                                                                                                                                                 |         |                                                                                                                                         |         |
| Principal Place of Business<br><b>8345 GLENEAGLE WAY<br/>NAPLES FL 34120<br/>US</b>                                                                                                                                           |         | Mailing Address<br><b>PO BOX 111267<br/>NAPLES FL 34108<br/>US</b>                                                                      |         |
| 2. Principal Place of Business - No P.O. Box #                                                                                                                                                                                |         | 3. Mailing Address                                                                                                                      |         |
| Suite, Apt. #, etc.                                                                                                                                                                                                           |         | Suite, Apt. #, etc.                                                                                                                     |         |
| City & State                                                                                                                                                                                                                  |         | City & State                                                                                                                            |         |
| Zip                                                                                                                                                                                                                           | Country | Zip                                                                                                                                     | Country |
| 6. Name and Address of Current Registered Agent<br><br><b>PECK, BERNARD S.<br/>5801 PELICAN BAY BLVD., STE. 103<br/>NAPLES FL 34108</b>                                                                                       |         | 7. Name and Address of New Registered Agent<br>Name<br>Street Address (P.O. Box Number is Not Acceptable)<br>City<br><b>FL</b> 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 _____<br><small>Signature, typed or printed name of registered agent and title (if applicable). (NOTE: Registered Agent signature required when reconstituting)</small>                                             |         |                                                                                                                                         |         |



1st MOORE CR2E037 (10/07)

|                                                                                                 |                                                        |
|-------------------------------------------------------------------------------------------------|--------------------------------------------------------|
| 4. FEI Number<br><b>59-2693196</b>                                                              | Applied For<br><input type="checkbox"/> No: Applicable |
| 5. Certificate of Status Desired <input type="checkbox"/> <b>\$8.75 Additional Fee Required</b> |                                                        |

|                                                              |                                                                                                                        |                                                              |
|--------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------|
| <b>FILE NOW: FEE IS \$61.25</b><br><b>Due By May 1, 2008</b> | 9. Election Campaign Financing<br>Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00 May Be Added to Fees</b> | <b>Make Check Payable to<br/>Florida Department of State</b> |
|--------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------|

| 10. OFFICERS AND DIRECTORS                       |                                                                                                                 | 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 |                                                                                               |
|--------------------------------------------------|-----------------------------------------------------------------------------------------------------------------|-------------------------------------------------------|-----------------------------------------------------------------------------------------------|
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY- ST- ZIP | TT<br>BRUCE, KENNTH S<br>1299 FOXFIRE LANE<br>NAPLES FL 34104<br><input type="checkbox"/> Delete                | TITLE<br>NAME<br>STREET ADDRESS<br>CITY- ST- ZIP      | <input type="checkbox"/> Change <input type="checkbox"/> Addition<br><i>See Attached List</i> |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY- ST- ZIP | VT<br>UPSON, TERRAL W<br>6585 NICHOLAS BLVD. #1401<br>NAPLES FL 34108<br><input type="checkbox"/> Delete        | TITLE<br>NAME<br>STREET ADDRESS<br>CITY- ST- ZIP      | <input type="checkbox"/> Change <input type="checkbox"/> Addition                             |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY- ST- ZIP | VT<br>MACKELFRESH, THOMAS J<br>361 ROCKHILL COURT<br>MARCO ISLAND FL 34145<br><input type="checkbox"/> Delete   | TITLE<br>NAME<br>STREET ADDRESS<br>CITY- ST- ZIP      | <input type="checkbox"/> Change <input type="checkbox"/> Addition                             |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY- ST- ZIP | T<br>HATTTEMER, ROBERT W<br>702 BOB WHITE LANE<br>NAPLES FL 34108<br><input type="checkbox"/> Delete            | TITLE<br>NAME<br>STREET ADDRESS<br>CITY- ST- ZIP      | <input type="checkbox"/> Change <input type="checkbox"/> Addition                             |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY- ST- ZIP | STT<br>FOSTER, TORREY N<br>2003 IMPERIAL GOLF COURSE BLVD<br>NAPLES FL 34110<br><input type="checkbox"/> Delete | TITLE<br>NAME<br>STREET ADDRESS<br>CITY- ST- ZIP      | <input type="checkbox"/> Change <input type="checkbox"/> Addition                             |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY- ST- ZIP | VT<br>GAULT, EDWIN S<br>1450 MEDOC LANE, S.W.<br>FORT MYERS FL 33919<br><input type="checkbox"/> Delete         | TITLE<br>NAME<br>STREET ADDRESS<br>CITY- ST- ZIP      | <input type="checkbox"/> Change <input type="checkbox"/> Addition                             |

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, 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 *Torrey N. Foster* 1/30/08 239-514-0499

**ATTACHMENT**  
**TRUSTEES AND OFFICERS OF**  
**THE YALE CLUB OF SOUTHWEST FLORIDA 2008**

40019534  
# N08795

President & Trustee

Samuel P. Cooley '53  
800 Breakaway Lane, #204  
Naples, FL 34108  
239-596-3666 (H), 239-596-3667 (FAX)  
860-558-0827 (C)  
cooleyack@aol.com

Vice President-Sponsorships & Trustee

Robert C. Bennett '44  
7065 Dennis Circle #103  
Naples, FL 34104  
239-352-0219 (H), 239-353-7719 (FAX)  
robertbennett3@comcast.net

Vice President-A Y A & Trustee

Marian E. Dolan '89 MMA, '94 MA  
6849 Grenadier Blvd. #601  
Naples, FL 34108  
239-248-7511 (H), 239-591-0973 (FAX)

Vice President-Ft. Myers & Trustee

Edwin S. Gault '54 MDiv  
1450 Medoc Lane, S.W.  
Ft. Myers, FL 33919  
239-481-9631 (H)  
239-481-7219 (FAX)  
esgault@aol.com

Vice President-Activities & Trustee

George O. Gelinias DMD - Faculty  
1167 Foxfire Lane  
Naples, FL 34104  
239-643-1404 (H)  
gelinasell1d@comcast.net

Vice President-Membership & Trustee

Richard Molloy '94 MPPM  
727 9<sup>th</sup> Avenue South  
Naples, FL 34102  
239-435-9262  
rmolloy@gulfshorecap.com

Vice President-ASC & Trustee

J. Thomas Mackelftsh '51 361  
Rockhill Court  
Marco Island, FL 34145  
239-642-6063 (H)  
jtommack@earthlink.net

Vice President-Endowment & Trustee

Robert E. Wenzel '53 E  
6001 Pelican Bay Blvd. # 1706  
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1690 (H) 239-591-2992 (FAX)  
rewmswmd@aol.com

Secretary, Treasurer & Trustee

Torrey N. Foster '56  
2003 Imperial Golf Course Blvd.  
Naples, FL 34110  
239-514-0799 (H), 239-248-2334 (C)  
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Trustee

Richard T. Bennett '52  
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Naples, FL 34103 239-  
434-6231 (H)  
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Trustee

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Trustee

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Trustee

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593-3913 (H) 239-593-  
3913 (FAX) 785-845-  
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# ATTACHMENT

40019534  
# N08795

## Trustee

Barie Fex-Barrington '68 M.Arch 1011  
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2736 (H), 239-543-2736 (FAX) [chrisbarie1@yahoo.com](mailto:chrisbarie1@yahoo.com)

## Trustee

Richard E. Harris '54  
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Naples, FL 34105 239-261-  
0365 239-261-0365 (FAX)  
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## Trustee

Robert W. Hattermer '53 E  
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(FAX)  
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## Trustee

Francis E. Moore '55 15971  
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Myers, FL 33908 239-481-  
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## Trustee

Michael Reilly '89 11910  
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6432 (FAX)  
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## Trustee

Roman Sazonov, 05 MA  
9690 Las Casas Drive  
Fort Meyers, FL 33919  
239-738-6039 (C)  
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## Trustee

Herbert R. Sleeper - Faculty  
350 Putter Point Drive  
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0668 (H) 239-352-4403  
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## Trustee

Adelaide Spanton  
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## Trustee

W. Terrell Upson '60  
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2474 (H) 239-597-2475  
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## Trustee

Thomas B. Wheeler '58  
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Naples, FL 34102  
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## Trustee

Donald R. Williams, Jr. '53  
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Naples, FL 34108 239-566-  
8587 (H) 239-593-3080  
(FAX)  
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## Trustee Emeritus

Bernard S. Peck '36, '39 LLB  
4151 Guld Shore Blvd. N. #702  
Naples, FL 34103 239-566-3600  
(H) 239-566-9376 (F)  
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## Executive Secretary

Jerilyn Bush  
8345 Gleneagle Way  
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348-9476 (H) 404-  
0729 (C)  
348-9791 (F)  
[Jhbush47@comcast.net](mailto:Jhbush47@comcast.net)

## Web Site Manager

Kellee Newberry  
The Web Professional  
501 Goodlette Road North #C206  
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## Yale Club Address

P.O. Box 111267  
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