

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Apr 23, 2007 8:00 am
Secretary of State

04-23-2007 90087 050 ****61.25

DOCUMENT # N21662

1. Entity Name

COLLIER ATHLETIC CLUB, INC.



Principal Place of Business

710 GOODLETTE ROAD NORTH
NAPLES FL 34102
US

Mailing Address

710 GOODLETTE ROAD NORTH
NAPLES FL 34102
US



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

1st MOORE

CR2E037 (10/06)

4. FEI Number

59-2733518

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

CRUSE, WILLIAM F
C/O COLLIER ATHLETIC CLUB, INC.
710 GOODLETTE ROAD NORTH
NAPLES FL 34102

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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW: FEE IS \$61.25
Due By May 1, 2007

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

Make Check Payable to
Florida Department of State

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE PD ☐ Delete
NAME KELLEY, KIM
STREET ADDRESS 600 PORTSIDE DRIVE
CITY-ST-ZIP NAPLES FL 34103

TITLE VP ☒ Change ☐ Addition
NAME KELLEY, KIM
STREET ADDRESS 600 PORTSIDE DR
CITY-ST-ZIP NAPLES, FL 34103

TITLE VP ☐ Delete
NAME HALLE, HENRY
STREET ADDRESS 2885 GULF SHORE BLVD, #301
CITY-ST-ZIP NAPLES FL 34102

TITLE PD ☒ Change ☐ Addition
NAME HENRY HALLIE
STREET ADDRESS 2885 GULF SHORE BLVD #301
CITY-ST-ZIP NAPLES, FL 34102

TITLE DIR ☐ Delete
NAME ELLIS, ROBERT
STREET ADDRESS 3553 GORDON DRIVE
CITY-ST-ZIP NAPLES FL 34102

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE DIR ☐ Delete
NAME KALMANS, AMY
STREET ADDRESS 2100 CLAYTON ROAD
CITY-ST-ZIP NAPLES FL 34102

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

4/25/07

239-263-2806