## FILE NOW: FILING FEE IS \$61.25

NONPROFIT **CORPORATION ANNUAL REPORT** 

1997



FLORIDA DEPARTMENT OF STATE

## Sandra B! Mortham

Secretary of State DIVISION OF CORPORATIONS

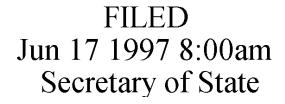
DOCUMENT #

N29806

(9)

THE NEW ATTITUDES CLUB OF NAPLES, INCORPORATED

Principal Place of Business	Mailing Address			
2740 BAYSHORE DR UNIT #14	2740 BAYSHORE DR UNIT #14			
NAPLES FL 33962	NAPLES FL 34112-5895			



|--|

2740 BAYSHO! NAPLES FL 33	RE DR UNIT #14 1962		2740 BAYSHORE DR UNI NAPLES FL 34112-5895	F #14					
				,		3. Date Incorporated or Qualified 12/13/1988	3a. Date of Last 02/14/		
<u> </u>	lace of Business		2a. Mailing Address			4. FEI Number 65-0089770		Applied For	
Sulte, Apt.	# ato	2	Suite. Apt. #, etc.			02.0004110	60.70	Not Applicable	
22			27			5. Certificate of Status Desired	\$8.75 Additional Fee Required		
City & State		21	City & State			6. Election Campaign Financing Trust Fund Contribution		O May Be d to Fees	
Zip	Coun	try	Zip	Cour	ntry	8. This corporation has liability for		s. 199.032,	
24	25 29 30 9. Name and Address of Current Registered Agent			30	Florida Statutes				
	9, Name and Addi	ess of Current He	distered Agent		81 Name	10. Name and Address of New Ro	agistereo Ağenr		
AALW#	t a Bunta			. [			<del></del>		
COLWELL, PHILIF 125 VERSAILLES CIR					82 Street Address (P.O. Box Number is Not Acceptable)				
" NAPLES	<b>FL93992</b> / 34	112			B3				
ľ					84 City			p Code	
11. Pursuant	to the previsions of Se	ctions 617.0502 and	617.1508, Florida Statut	es, the ab	ove-named	corporation submits this statement for the poration's board of directors. I hereby acce	purpose of changing	its registered	
agent. I a	m familiar with pand an	cept the obligation	of Section 617.0503 Fi	ori a Stati	ites.	poration's board or directors. Thereby acce	prime appointment a	as registered	
SIGNATURES	1 This	$p \setminus f \cdot c$	diwell				<u> 17</u>		
12.		he of registered agent and OFFICERS AND DIF		E: Registered	Agent signature	a required when reinstating)  ADDITIONS/CHANGES TO OFFI	DEDS AND DIDECTO	100 IAI 12	
TITLE	10- T	UFFICERS AND DIF	DELETE	1,1 (1)		TREASURER	Change		
NAME	COLWELL, PHILI	P		1.2 NA		ROLWELL, PHILIP			
STREET ADDRESS	125 VERSAILLES				EET ADDRESS	2013			
CITY-ST-ZIP	NAPLES FL				Y-ST-ZIP			Ì	
TITLE	<i>.</i> D'		DELETE	2.1 TIT	.E	DIRECTOR	☐ Change	Addition	
NAME	MATLACK, RICHARD L. 2			2.2 NA	ΝÊ	DIRECTOR Change Addition			
STREET ADDRESS	16 CHISHOLM T	'n		2.3 ST	REET ADDRESS			Ì	
CITY-ST-ZIP	NAPLES FL				Y-ST-ZIP				
TITLE	D PART OOK DON		☐ DELETE	3.1 1(1)		MATLUCK DONNA	Change	Addition	
NAME	MATLOCK DON			3.2 NAI		MATLOCK DONNA			
STREET ADDRESS	16 CHISHOLM T NAPLES FL	n.		1	EET ADDRESS	<b>!</b> 		, [	
CITY-ST-ZIP TITLE	(W) LEO FE		DELETE	3.4. CI	Y-ST-ZIP E	p.occmp	Change	e Z Addition	
NAME				4. 2 NA		DIRECTOR ROBERT GUEVIN		<b>7</b>	
STREET ADDRESS					EET ADDRESS	284 BENSON ST			
CITY-ST-ZIP				4 4 CIT	Y-ST-ZIP	Naples, FL 34113		}	
TITLE			☐ DELETE	5.1 TITI	.E		Change	Addition	
NAME				5.2 NA	ΛE				
STREET ADDRESS					EET ADDRESS			15	
CITY-ST-ZIP			DELETE		r-ST-ZIP			6/17/97	
TITLE				6.1 TIT			☐ Change	Addition	
NAME STREET APPRESS				6.2 NAI				e _	
STREET ADDRESS CITY-ST-ZIP					eet address (-st-zip	1	Bk Dy	10,00	
Ott 1 - Ot - LIF				0.9 011	DI-FIE	L		14	

14. I do 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 annual report or supplemental annual 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 12 or Block 13 if changed or or an attachment with 45 address.