## FILE NOW: FILING FEE IS \$61.25

NONPROFIT **CORPORATION ANNUAL REPORT** 

1998



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State. DIVISION OF CORPORATIONS

DOCUMENT #

N29806

(9)

THE NEW ATTITUDES CLUB OF NAPLES, INCORPORATED				A ADBITION ON THE HOLD HOLD COLUMN ONLY BUILD	iki alak 61813 bida nabi mbi laba
Principal Plac	ce of Business	Mailing Address		I SADVINOS BSO SIUŠID SETIE DRŽIO DŽIJE DE	ONE CITALO CITALO CERTE DICEI CITALE 1981
ATA BIVALARE BE INTE					
2740 BAYSHORE DR UNIT #14 2740 BAYSHORE DR UNIT 4 NAPLES FL 34112 NAPLES FL 34112			F14	3. Date Incorporated or Qualified	
144 220 12 01	****	INVICED IT SALIS		12/13/1988	
				4. FEI Number	Applied For
0.00000000	N7-46			65-0089770	Not Applicable
2. Principal F	Place of Business	2a. Mailing Address 26		5. Certificate of Status Desired	\$8.75 Additional Fee Required
Suite, Apt. #, etc.		Suite, Apt. #, etc.		6. Election Campaign Financing	\$5.00 May Be
27		27		Trust Fund Contribution	
Only di State		<b>├</b> ── '		7. Is this nonprofit corporation a homeor	
23		28		U Yes	s 🔲 No
Zip	Country	Zip	Country	8. This corporation owes or has paid the	
24	25	29 3	10	Personal Property Tax due June 30.	Yes No
9. Name and Address of Current Registered Agent  10. Name and Address of New Registered Agent  81 Name					
GOLUMENT BUILD			OUEVIN, ROBERT		
125 VERSAILLES CIR			B2 Street Add	fress (P.O. Box Number is Not Acceptable) 8 4 73 ENSON	
NAPLES FL 34112					
14466	716 01112		24 07		
			84 City	JAPLES	FL 85 Zip Code 3 47/3
11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida, Such change was authorized by the corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida, Such change was authorized by the corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida, Such change was authorized by the corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida, Such change was authorized by the corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida, Such change was authorized by the corporation submits this statement for the purpose of changing its registered of Florida.					
agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.					
SIGNATURE Robert J. Guevin No. (NOIF Registered Means (modern when Property of the Storage of th					~10~98
DATE:					
12.	OFFICERS ANI	D DIRECTORS  DELETE	13.	ADDITIONS/CHANGES TO OFFICERS	
TITLE	COLMELL DUILD	DELETE.	1.1 TITLE D	THILIP	Change • Addition
NAME	COLWELL, PHILIP		1.2 NAME	OIWEIL, PHILIP 25 VERSAILES CIR	
STREET ADDRESS	125 VERSAILLES CIR		1.3 STREET ADDRESS	UAPLES, FI 34117	
CITY-ST-ZIP	NAPLES FL	DELETE			10 ob 1 4 4 4 99
TITLE	D D	☐ DELETE		MATLACK RICHARD L.	Change
NAME	MATLACK, RICHARD L.		2.2 NAME	1 SONDERHEN CIR	
STREET ADDRESS	16 CHISHOLM TR		2.3 STREET ADDRESS	NAPLES FI 34114	
CITY-ST-ZIP TITLE	NAPLES FL	DELETE		·	Oberes Madelles
	MATI OOK DONNA	DELETE	${\mathcal D}$	DOROTHY DRISKILL	Change X Addition
NAME	MATLOCK DONNA 16 CHISHOLM TR.		3.2 NAME	DOROTHY DRISKILL 18 BAMBOO DR.	
STREET ADDRESS			1	NAPLES, F1 34112	
CITY-ST-ZIP	NAPLES FL	T DELETE	3.4. CITY-ST-ZIP	7-11-23, 7-1 34112	X (0)
TITLE	OUEWN DODEDT	☐ DELETE	4.1 TITLE	GUEVIN, ROBERT	Change Addition
NAME	GUEVIN, ROBERT		1. 1. 10 10 1.	284 BENSON ST	
STREET ADDRESS	284 BENSON ST		4.3 STREET ADDRESS	NAPLES FI 34113	
CITY-ST-ZIP	NAPLES FL 34113	DELETE	4.4 GH 1-31-21F	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	Change Addition
TITLE		, LA DECETE	5.1 TITLE		Change Addition
NAME			5.2 NAME		
STREET ADDRESS			5.3 STREET ADDRESS		
CITY-ST-ZIP		Driete	5.4 CITY - ST - ZIP		Channe 1 42200
TITLE		☐ DELETE	6.1 TITLE		L Change   Addition
NAME			6.2 NAME		
STREET ADDRESS			6.3 STREET ADDRESS		

CITY-ST-ZIP

14. I 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 enter a state of the corporation of the corporation

**FILED** 

Jun 18 1998 8:00am

Secretary of State