2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT				<sub>1</sub> Fe	FILED Feb 09, 2006 8:00 am Secretary of State	
DOCUMENT # N39851					01-17-2006 90276 036 ****61.25	
1. Entity Name SOUTHWEST FLORIDA GOLF CHARITIES, INC.						
1207 SUNBIRD AVE 12 MARCO ISLAND, FL 34-1456 UN		Mailing Address 12700 TAMIAMI TRAIL EAST UNIT NO. 11 PMB 154 NAPLES, FL 34113			TOD IN THERE AND ADD DEVENUES AND ADD DO DO	
2. Principal F	Place of Business	3. Mailing Address	ailing Address 12693 Tamlam, T.R. E.			
Suite, Apt. #, etc.		Suite, Apt. #, etc.		04400000	ng-NP CR2E037 (11/05)	
City & State		City & State Naples FL		4. FEt Number 65-020800	4. FEr Number 65–0208005 Not Applicable	
Zip	Country	210 34113 - 842M	Country	5. Certificate of St		
	6. Name and Address of Current R		Name	7. Name and Add	ress of New Registered Agent	
	D, JOHN P. T TAMIAMI TRAIL		Street Address (		Not Acceptable)	
NAPLES,	FL 33962					
e .			City FL Zip Code		FL Zip Code	
<ol> <li>The above the obligation</li> </ol>	named entity submits this statement for i tions of registered agent.	the purpose of changing its re	gistered affice or regis	stered agent, or both, in	the State of Florida. I am familiar with, and accept	
SIGNATURE	Signature, lyped or previou name of regretered egent an	d this if applicable (NOTE F	legistered Agent signature requ	ined when reinstations)	DATE	
_ =:-	Filing Fee is \$61.25 Due by May 1, 2006	9. Election Camp	9. Election Campaign Financing Trust Fund Contribution.		\$5.00 May Be Make check payable to Added to Fees Florida Department of State	
10.	OFFICERS AND DIRE		11.	ADDITIONS/CHANG	ES TO OFFICERS AND DIRECTORS IN 10	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD COUTURE, CRAIG 1112 1/2 N COLLIR BLVD MARCO ISLAND, FL 34145	De <del>ls</del> te	TITLE NAME STREET ADDRESS CITY-ST-ZIP		Change Addition	
TITLE NAME Street address City-st-zip	D WARD, MICHAEL 1850 ISLE OF CAPRI RD. NAPLES, FL	Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		Change Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD SHERWOOD, IRV 44 CYPRESS VIEW NAPLES, FL 34113	Detete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		🗋 Change 🛄 Addition	
TITLE NAME STREET ADDRESS City-St-Zip	SD MACKEL FRESH, TOM 361 ROCKHILL COURT MARCO ISLAND, FL 34145	🗋 Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		🗋 Change 🚺 Addition.	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D GOODALL, MAXINE 752 EAGLE CREEK DRIVE #103 NAPLES, FL 34113	Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		Change 🗌 Addition	
TITLE NAME STREET ADORESS CITY-ST-ZIP	D SIEMERS, JAY 780 WATERFORD DRIVE #104 NAPLES, FL 34113	Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		🗋 Change 🔲 Addition	
12. I hereby ( indicated of the cor changed	certify that the information supplied with it on this report or supplemental report is tr poration or the receiver or trustee empow , or on an attachment with an address with	is filling does not qualify for it ue and accurate and that my ered to execute this report and h all other like empowered.	te exemptions containe signature shall have th required by Chapter 6	ed in Chapter 119, Flori e same legal effect as if 17, Florida Statutes; and	da Statutes. I further certify that the information made under oath; that I am an officer or director d that my name appears in Block 10 or Block 11 if	
SIGNATURE:				21	606 239-394-1900 Device Proces	
		(	RAIG J. TRAS	Contur-	<u> </u>	

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## FLORIDA DEPARTMENT OF STATE Division of Corporations

January 24, 2006

## SOUTHWEST FLORIDA GOLF CHARITIES, INC. 12693 TAMIAMI TR E NAPLES, FL 34113

## Subject: SOUTHWEST FLORIDA GOLF CHARITIES, INC.

Reference Number:

N39851

Please be advised, we have received your annual report/uniform business report and your check(s) totaling \$61.25; however, the report <u>has not been filed</u> and a copy is being returned for the following correction(s):

The annual report/uniform business report must be signed by an officer or director of the corporation.

After the corrections have been made, please return the report to: Division of Corporations, P.O. Box 1500, Tallahassee, Florida 32302-1500 within 30 days from the date of this letter.

If you have additional questions or need further assistance, please call the Division of Corporations at 850-245-6056 and press 4. Your call will be answered in the order it is received.

/MS ANNUAL REPORTS SECTION

C - Prep Envelope To

ATTACHMENT

64000970

P.O. BOX 6327 - Tallahassee, Florida 32314