

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Jan 10, 2007 8:00 am**  
**Secretary of State**

01-10-2007 90047 007 \*\*\*150.00

**DOCUMENT # P04000131580**

1. Entity Name  
**TROPICALS BOWLING CLUB, INC.**



Principal Place of Business  
**2391 RIVER REACH DRIVE  
NAPLES, FL 34104 US**

Mailing Address  
**2391 RIVER REACH DRIVE  
NAPLES, FL 34104 US**

40000920



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

01072007

Chg-P

CR2E034 (12/06)

4. FEI Number  
**47-0945186**

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

**TRENTO, SHELBY D  
2391 RIVER REACH DRIVE  
NAPLES, FL 34104**

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 \$150.00  
After May 1, 2007 Fee will be \$550.00**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$5.00** May Be  
Added to Fees

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE **P** ☒ Delete  
NAME **TRENTO, SHELBY D**  
STREET ADDRESS **2391 RIVER REACH DRIVE**  
CITY-ST-ZIP **NAPLES, FL 34104**

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

TITLE **VP** ☒ Delete  
NAME **WILLIAMS, HEIDI**  
STREET ADDRESS **1260 15TH STREET SW**  
CITY-ST-ZIP **NAPLES, FL 34117**

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

TITLE **SEC** ☒ Delete  
NAME **ORTEGA, MELANIE**  
STREET ADDRESS **7737 HAVERHILL COURT**  
CITY-ST-ZIP **NAPLES, FL 34104**

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

TITLE **TREA** ☒ Delete  
NAME **DUKES, LYN**  
STREET ADDRESS **PO BOX 263**  
CITY-ST-ZIP **NAPLES, FL 34106**

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

SEE THE  
ATTACHED LIST

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 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 607, 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:

*Jodi A. Maddox*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

1/7/07 774-2741

ATTACHMENT

40000920

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TROPICALS BOWLING CLUB, INC.  
DOCUMENT # P000131580

LIST OF OFFICERS & DIRECTORS FOR 2007 FOR PROFIT CORPORATION ANNUAL REPORT

PRESIDENT	HOLCOMB, GWEN P.O. BOX 178 NAPLES, FLORIDA 34106
VICE PRESIDENT	KIERSTED, KIM 778 WATERLOO COURT NAPLES, FLORIDA 34120
SECRETARY	KIERSTED, ANN 778 WATERLOO COURT NAPLES, FLORIDA 34120
TREASURER	MADDOX, JODI 4102 OUTER DRIVE NAPLES, FLORIDA 34112
DIRECTOR	TRENTO, SHELBY 2391 RIVER REACH DRIVE NAPLES, FLORIDA 34102
DIRECTOR	CHARRON, MAGGIE 778 WATERLOO COURT NAPLES, FLORIDA 34120
DIRECTOR	HOLCOMB, MEGAN P.O. BOX 178 NAPLES, FLORIDA 34106
DIRECTOR	DUKES, M. LYN POST OFFICE BOX 263 NAPLES, FLORIDA 34106