

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT  
CORPORATION  
ANNUAL REPORT  
1996



FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State  
DIVISION OF CORPORATIONS

FILED  
Mar 19 1996 8:00 am  
Secretary of State

DOCUMENT # P94000083379 (5)

1. Corporation Name

SUNSET HARBOR CLUB, INC.

Principal Place of Business

4500 EXECUTIVE DRIVE  
SUITE 300  
NAPLES FL 33999  
US

Mailing Address

4500 EXECUTIVE DRIVE  
SUITE 300  
NAPLES FL 33999  
US

3. Date Incorporated or Qualified  
11/15/1994

3a. Date of Last Report  
04/07/1995

2. Principal Place of Business

2a. Mailing Address

21

26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

City & State

City & State

23

28

Zip

Country

Zip

Country

24

25

29

30

4. FEI Number

65-0536172

Applied For  
Not Applicable

5. Certificate of Status Desired

☐ \$8.75 Additional  
Fee Required

6. Election Campaign Financing  
Trust Fund Contribution

☐ \$5.00 May Be  
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,  
Florida Statutes ☐ Yes ☒ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

MAC'KIE, PAMELA S  
5551 RIDGEWOOD DRIVE  
SUITE 201  
NAPLES FL 33963

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1506, 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's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature typed or printed name of registered agent and filed in application

(Initial Registered Agent's signature required when re-registering)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE VP ☐ DELETE

NAME HARDY, ROBERT S  
STREET ADDRESS 6289 BURNHAM RD.  
CITY-STATE-ZIP NAPLES FL

TITLE D ☐ DELETE

NAME HARDY, ROBERT P  
STREET ADDRESS 6289 BURNHAM RD.  
CITY-STATE-ZIP NAPLES FL 33999

TITLE D ☒ DELETE

NAME HOWELL, SHANNON  
STREET ADDRESS 6289 BURNHAM RD.  
CITY-STATE-ZIP NAPLES FL 33999

TITLE D ☐ DELETE

NAME BARNARD, THOMAS L  
STREET ADDRESS 211 PINE VALLEY CIRCLE  
CITY-STATE-ZIP NAPLES FL 33962

TITLE P ☐ DELETE

NAME SMITH, CLARENCE  
STREET ADDRESS 1736 WATER ROLL DR.  
CITY-STATE-ZIP NAPLES FL

TITLE T ☐ DELETE

NAME JOHNSON, JR. R  
STREET ADDRESS 4500 EXECUTIVE DRIVE SITE 300  
CITY-STATE-ZIP NAPLES FL

1.1 TITLE

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-STATE-ZIP

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-STATE-ZIP

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-STATE-ZIP

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-STATE-ZIP

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-STATE-ZIP

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-STATE-ZIP

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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 607, Florida Statutes; and that my name appears in Block 12 or Block 13, if changed, or on an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1-16-96

Date

941-577-9061

Daytime Phone #

CR2E034 (12/95)