

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

FILED
Apr 27, 1999 8:00 am
Secretary of State

04-27-1999 90123 041 ***158.75

DOCUMENT # P94000083379

1. Corporation Name

SUNSET HARBOR CLUB, INC.

Principal Place of Business

4500 EXECUTIVE DRIVE
SUITE 300
NAPLES FL 34119
US

Mailing Address

4500 EXECUTIVE DRIVE
SUITE 300
NAPLES FL 34119
US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

11/15/1994

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 owes the current year Intangible
Personal Property Tax.



Yes



No

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip County

24 25

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip Country

29 30

9. Name and Address of Current Registered Agent

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

10. Name and Address of New Registered Agent

81 Name

JANET KELLY

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

4500 EXECUTIVE DRIVE # 300

83

84 City

NAPLES

FL

85 Zip Code

34119

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, 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'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]

JANET KELLY

Vice President

3/22/99

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

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

☐ DELETE

TITLE D
NAME HARDY, ROBERT P
STREET ADDRESS 6289 BURNHAM RD.
CITY-ST-ZIP NAPLES FL 34119

☐ DELETE

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

☐ DELETE

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

☐ DELETE

TITLE ST
NAME KELLY, JANET
STREET ADDRESS 4500 EXECUTIVE DR.
CITY-ST-ZIP NAPLES FL

☐ DELETE

TITLE VP
NAME KELLY, JANET
STREET ADDRESS 4500 EXECUTIVE DR.
CITY-ST-ZIP NAPLES FL

☐ DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 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 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

[Signature]

JANET KELLY

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/22/99

Date

(941) 597-9061

Daytime Phone #

CR2E034 (11/98)