

2014 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N07045

Entity Name: ROYAL PALM COUNTRY CLUB OF NAPLES, INC.**Current Principal Place of Business:**405 FOREST HILLS BLVD
NAPLES, FL 34113**Current Mailing Address:**405 FOREST HILLS BLVD
NAPLES, FL 34113 US**FEI Number:** 59-2489083**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**WHITE, EDWARD
787 BLUEBONET COURT
MARCO ISLAND, FL 34145 US*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.***SIGNATURE:** EDWARD WHITE

04/07/2014

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title PRESIDENT
Name WHITE, EDWARD
Address 787 BLUEBONET CT
City-State-Zip: MARCO ISLAND FL 34145

Title TREASURER
Name HAWTHORNE, DOUGLAS
Address 1847 PIEDMONT DRIVE
City-State-Zip: NAPLES FL 34104

Title VP
Name DINGERDISSEN, LOUIS
Address 6557 CHESTNUT CIRCLE
City-State-Zip: NAPLES FL 34109

Title VP
Name SCHINK, WAYNE
Address 535 VIA VENETO
 #102
City-State-Zip: NAPLES FL 34108

Title SECRETARY
Name CHIARELLO, LINDA
Address 124 PALMETTO DUNES CIRCLE
City-State-Zip: NAPLES FL 34113

Title DIRECTOR
Name LARKIN, DANIEL
Address 8978 LELY ISLAND CIRCLE
City-State-Zip: NAPLES FL 34113

Title DIRECTOR
Name MATTHEWS, WILLIAM
Address 145 MURFIELD CIRCLE
City-State-Zip: NAPLES FL 34113

Title DIRECTOR
Name LAWN, JIM
Address 7655 HERNANDO COURT
City-State-Zip: NAPLES FL 34114

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I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with all other like empowered.

SIGNATURE: EDWARD WHITE

PRESIDENT

04/07/2014

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title	DIRECTOR
Name	STEPANICH, THOMAS
Address	438 TORREY PINES POINT
City-State-Zip:	NAPLES FL 34113