

2018 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N10000009193

Entity Name: SEMINOLE CLUB OF NAPLES, INC.**Current Principal Place of Business:**2210 VANDERBILT BEACH ROAD SUITE #1201
NAPLES, FL 34109**Current Mailing Address:**PO BOX 111732
NAPLES, FL 34108 US**FEI Number: 27-3584468****Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**COTTRELL TAX & ACCOUNTING, LLC
5147 CASTELLO DRIVE
NAPLES, FL 34103 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:**_____
Electronic Signature of Registered Agent_____
Date**Officer/Director Detail :**

Title PRESIDENT, DIRECTOR
Name LEE, ALTONY III
Address POBOX 111732
City-State-Zip: NAPLES FL 34110

Title VP, DIRECTOR
Name TOTH, SCOTT
Address POBOX 111732
City-State-Zip: NAPLES FL 34110

Title DIRECTOR, SECRETARY
Name AMY , ROOT
Address POBOX 111732
City-State-Zip: NAPLES FL 34110

Title DIRECTOR
Name STEPPLING, CARL
Address POBOX 111732
City-State-Zip: NAPLES FL 34110

Title DIRECTOR
Name GONZALES, SAL
Address POBOX 111732
City-State-Zip: NAPLES FL 34110

Title TD
Name COTTRELL, BJ
Address 5147 CASTELLO DRIVE
City-State-Zip: NAPLES FL 34103

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: SCOTT J TOTH**VICE PRESIDENT****04/23/2018**_____
Electronic Signature of Signing Officer/Director Detail_____
Date