

2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N13857

FILED
Feb 10, 2011
Secretary of State

Entity Name: GLENEAGLES GOLF VILLAS, INC.

Current Principal Place of Business:

2180 W SR 434
SUITE 5000
LONGWOOD, FL 32779 US

New Principal Place of Business:

Current Mailing Address:

2180 W SR 434
SUITE 5000
LONGWOOD, FL 32779 US

New Mailing Address:

FEI Number: 59-2902723 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

HART, JAMES W JR.
SENTRY MANAGEMENT, INC.
2180 W. STATE RD. 434, STE. 5000
LONGWOOD, FL 32779 US

Name and Address of New Registered Agent:

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

OFFICERS AND DIRECTORS:

Title: PD
Name: WIMER, MATT
Address: 2180 WEST SR 434 STE 5000
City-St-Zip: LONGWOOD, FL 32779

Title: VPD
Name: WINDJACK, SCOTT
Address: 2180 WEST SR 434 STE 5000
City-St-Zip: LONGWOOD, FL 32779

Title: TD
Name: MOSS, KAREN
Address: 2180 WEST SR 434 STE 5000
City-St-Zip: LONGWOOD, FL 32779

Title: SD
Name: WEST, JANE
Address: 2180 WEST SR 434 STE 5000
City-St-Zip: LONGWOOD, FL 32779

Title: D
Name: HONADLE, BARBARA
Address: 2180 WEST SR 434 STE 5000
City-St-Zip: LONGWOOD, FL 32779

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: MATT WIMER

PD

02/10/2011

Electronic Signature of Signing Officer or Director

_____ Date