


**2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

**FILED**  
**Jan 22, 2007 08:00 AM**  
**Secretary of State**

**DOCUMENT # N94000002783**

1. Entry Name  
 HOLE-IN-THE-WALL GOLF CLUB, INC.



Principal Place of Business  
 3550 GOODLETTE ROAD NORTH  
 NAPLES, FL 34104 US

Mailing Address  
 P.O. BOX 7217  
 NAPLES, FL 34104 US

**DO NOT WRITE IN THIS SPACE**



01092007 No Chg-NP CR2E037 (4/06)

4. FEI Number  
 59-0818061

Applied For  
 Not Applicable

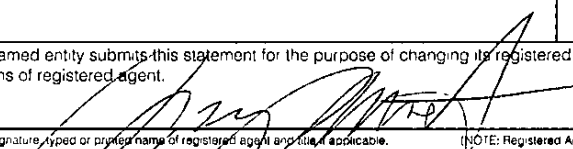
5. Certificate of Status Desired  **\$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

SETTLE, LARRY G  
 7687 PEBBLE CREEK CIR  
 SUITE 504  
 NAPLES, FL 34108

**DO NOT WRITE IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE:  DATE: \_\_\_\_\_

Signature typed or printed name of registered agent and title, if applicable. (NOTE: Registered Agent signature required when resigning)

**Filing Fee is \$61.25**  
**Due by May 1, 2007**

9. Election Campaign Financing Trust Fund Contribution.  **\$5.00** May Be Added to Fees

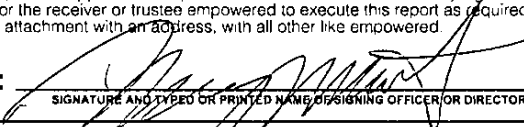
U00000598751  
 01/24/07-80088-012 61.25

10. OFFICERS AND DIRECTORS

TITLE	PD
NAME	SETTLE, LARRY G
STREET ADDRESS	7687 PEBBLE CREEK CIR SUITE 504
CITY-ST-ZIP	NAPLES, FL 34108
TITLE	VPTD
NAME	LAWERENCE, YEWELL
STREET ADDRESS	6350 PELICAN BAY BLVD #205B
CITY-ST-ZIP	NAPLES, FL 34108
TITLE	SD
NAME	BEALL, GEORGE MR.
STREET ADDRESS	1624 GULF SHORE BLVD #104
CITY-ST-ZIP	NAPLES, FL 34102
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

**DO NOT WRITE IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental 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 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:  DATE: \_\_\_\_\_ DAYTIME PHONE #: \_\_\_\_\_

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR