

# 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N08494

FILED  
Jan 18, 2006  
Secretary of State

Entity Name: TWIN ISLES COUNTRY CLUB, INC.

**Current Principal Place of Business:**

301 MADRID BLVD  
PUNTA GORDA, FL 33950

**New Principal Place of Business:**

**Current Mailing Address:**

301 MADRID BLVD  
PUNTA GORDA, FL 33950

**New Mailing Address:**

FEI Number: 59-2542237      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

YOUNG, ALAN J  
3962 SAN PEITRO COURT  
PUNTA GORDA, FL 33950      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 ( ) Delete  
Name: YOUNG, ALAN J  
Address: 3962 SAN PEITRO COURT  
City-St-Zip: PUNTA GORDA, FL 33950

Title: VPD ( ) Delete  
Name: WOLLERMAN, WAYNE  
Address: 3853 BORDEAUX DRIVE  
City-St-Zip: PUNTA GORDA, FL 33950

Title: TD ( ) Delete  
Name: MONTEMARANO, FRANK  
Address: 307 PORTOFINO DRIVE  
City-St-Zip: PUNTA GORDA, FL 33950

Title: SD ( ) Delete  
Name: O'SULLIVAN, MICHAEL  
Address: 807 MONACO DRIVE  
City-St-Zip: PUNTA GORDA, FL 33950

Title: D ( ) Delete  
Name: SHARPLESS, RONALD  
Address: 5089 SAN ROCCO DR.  
City-St-Zip: PUNTA GORDA, FL 33950

Title: D ( ) Delete  
Name: LAURA, FELMORE  
Address: 638 MADRID BLVD  
City-St-Zip: PUNTA GORDA, FL 33950

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: SD (X) Change ( ) Addition  
Name: RENOIS, BERNARD  
Address: 626 ANDROS COURT  
City-St-Zip: PUNTA GORDA, FL 33950

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated 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 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 an address, with all other like empowered.

SIGNATURE: ALAN YOUNG

PRES

01/18/2006

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date