

STREET ADDRESS

CITY-ST-ZIP

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED May 02, 2007 8:00 am Secretary of State

	7411110711								•			
DOCUMENT # 728368 1. Entity Name HIGH POINT COUNTRY CLUB, GROUP FOUR, INC.							1	05-02-2007)23 ****61	.25	
1044 CASTELLO DR, STE 206 C/ NAPLES, FL 34103 US 26			Mailing Address C/O RESORT MANAGEMENT 2685 SOUTH HORSESHOE DRIVE, #215 NAPLES, FL 34104					1618	(<i>u)</i> 	NIC BIBIN BIBIN BIBI	11 F1 81 188 1	
2. Principal Place of Business - No P.O. Box # 3. N			J. Mailing Address									
Suite, Apt. #, etc.			Suite, Apt. #, etc.				03162007	Chg-NP	CR2E0	37 (12/06)		
City & State	9	City & State					4. FEI Number 59-1855			 	plied For t Applicable	
Zip	Country		Zip		Country		5. Certificate o	of Status Desired		\$8.75 Add Fee Require		
	6. Name and Address of Current	t Registere	d Agent		7. Name and Address of New Registered Agent							
						Name						
MC BRIDE, THOMAS 13 HIGH POINT CIRCLE, #304 NAPLES, FL 34103					Street Address (P.O. Box Number is Not Acceptable)							
					City FL Zip Code							
8. The above	named entity submits this statement f	or the purpo	ose of changing its	registere	ed office or	register	red agent, or both	, in the State of Flo	orida. I am	familiar with,	and accept	
	ions of registered agent.					J	•					
SIGNATURE .	Signature, typed or printed name of registered ager	nt and little if app	licable. (NOTE	: Registered	d Agent signat	ure required	i when reinstating)	•	DATE			
Filing Fee is \$61.25 Due by May 1, 2007			9. Election Campaign Financing Trust Fund Contribution.				\$5.00 May Be Make check payable to Florida Department of State					
10.	OFFICERS AND D	IRECTORS		11.			ADDITIONS/CHA	NGES TO OFFICE	RS AND D	IRECTORS IN	10	
TITLE	D	INCOTONO	☐ Delete	TITLE	:						Addition	
NAME STREET ADDRESS	DOERNER, GEORGE 13 HIGH POINT CIRCLE NORT	H, #305	Li Desete	NAMI STRE	E Et aodress	Doe 13 t	rner, G	eorge.	1e#3	305	· ,	
CITY-ST-ZIP	NAPLES, FL 34103			CITY	-ST-ZIP	$\Delta \mathcal{K}$	apils/ F	L. 3410	<u> </u>		\ <u></u>	
NAME STREET ADDRESS CITY-SI-ZIP	TD MCBRIDE, THOMAS 13 HIGH POINT CIRCLE #304 NAPLES, FL 34103		☐ Delete			Day Hat	rris, Fra	ank. Of Circ	し#1 03	☐ Change	Addition	
NAME STREET ADDRESS CITY-ST-ZIP	VD FOSS, EDWARD 13 HIGH PT.CIR,N.#306 NAPLES, FL スリルク		☐ Deleta		-	FOS:	s, Edwa figh Poi	int Circo	10 #	Change 306	Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD MILLER, DOROTHY 13 HIGH POINT CR 106 NAPLES, FL 34103		☐ Delete			10 15 H	Sch, Aug High Poi	int circ	cle#	□ Change #109	Addition	
TITLE NAME STREET ADDRESS CITY-SI-ZIP	PD SMITH, GARY 13 HIGH POINT CIR #202 NAPLES, FL 24103		☐ Delete			, , , , , ,	T			☐ Change	☐ Addition	
SITLE	1000 220,12 3410)		☐ Delete	TITLE	E					☐ Change	Addition	

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.

STREET ADDRESS CITY-ST-ZIP

SIGNATURE: Acros Describe THOMAS MEBRIDE 4/26/2007

SIGNATURE: Date Describe Describ