

2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 728368

FILED
Apr 15, 2011
Secretary of State

Entity Name: HIGH POINT COUNTRY CLUB, GROUP FOUR, INC.

Current Principal Place of Business:

C/O RESORT MANAGEMENT
2695 HORSESHOE DRIVE, SUITE#215
NAPLES, FL 34104 US

New Principal Place of Business:

C/O RESORT MANAGEMENT
2685 HORSESHOE DRIVE, SUITE#215
NAPLES, FL 34104 US

Current Mailing Address:

C/O RESORT MANAGEMENT
2695 HORSESHOE DRIVE, SUITE#215
NAPLES, FL 34104 US

New Mailing Address:

C/O RESORT MANAGEMENT
2685 HORSESHOE DRIVE, SUITE#215
NAPLES, FL 34104 US

FEI Number: 59-1855124

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MC BRIDE, THOMAS
13 HIGH POINT CIRCLE, #304
NAPLES, FL 34103 US

Name and Address of New Registered Agent:

SMITH, GARY
13 HIGH POINT CIRCLE, #202
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: GARY SMITH

04/15/2011

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: S
Name: DOERNER, GEORGE
Address: 13 HIGH POINT CIRCLE NORTH, #305
City-St-Zip: NAPLES, FL 34103

Title: VP/T
Name: MCBRIDE, THOMAS
Address: 13 HIGH POINT CIRCLE #304 & 203
City-St-Zip: NAPLES, FL 34103

Title: D
Name: HARRIS, FRANK
Address: 13 HIGH PT.CIR,N.#101
City-St-Zip: NAPLES, FL 34103

Title: P
Name: SMITH, GARY
Address: 13 HIGH POINT CIRCLE #202
City-St-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: GARY SMITH

P

04/15/2011

Electronic Signature of Signing Officer or Director

Date