## 2003 NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

## **DOCUMENT # 728369**

HIGH POINT COUNTRY CLUB, GROUP FIVE, INC.



**FILED** Mar 31, 2003 8:00 am Secretary of State 03-31-2003 90169 035 \*\*\*\*61.25

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incipal Place of Business  O INTEGRATED PROPERTY MGMT  35 10TH ST N #201  PLES FL 33940  WAIling Address  C/O INTEGRATED PROPERTY MGMT  3435 10TH ST N #201  NAPLES FL 33940  US		GMT.	) 1880// 1408/0 (//	ALI MAKAR MINIR RAMA LEM RIAN		
3. Mailing Address						
Suite, Apt. #, etc.			CHECK HERE IF MAKING CHANGES			
City & Sta	City & State		4. FEI Number 50	39 1909093		oplied For ot Applicable
Zip		Country	5. Certificate of St.	atus Desired	\$8.75 Add	ditional
t Registered Age	nt=	_رسين	7. Name and Add	ress of New Register	ed Agent –	
	,	Name Street Addre	ss (P.O. Box Number is N	Not Acceptable)		
					Zip Cod	е
or the purpose of	changing its regis	tered office or regi	stered agent, or both, in	the State of Florida. I	am familiar with,	and accept
at and title if applicable.	(NOTE: Regis	lered Agent signature req	uired when reinstating)	DA	TE.	
* FUE NUW FEE IS 361.75			\$5.00 May Be Added to Fees			
IRECTORS	1	1.	ADDITIONS/CHANG	ES TO OFFICERS AND	DIRECTORS IN	10
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	N S	NAME STREET ADDRESS CITY-ST-ZIP	440 0700		Change	Addition
	C/O INTEGRA 3435 10TH ST NAPLES FL 3 US  3. Mailing Ad	C/O INTEGRATED PROPERTY MO 3435 10TH ST N #201 NAPLES FL 33940 US  3. Mailing Address  Suite, Apt. #, etc.  City & State  Zip  At Registered Agent  9. Election Campaig Trust Fund Contrib  Diffectors  Delete  Delete	Mailing Address  C/O INTEGRATED PROPERTY MGMT. 3435 10TH ST N #201 NAPLES FL 33940 US  3. Mailing Address  Suite, Apt. #, etc.  City & State  Zip Country  Name  Street Addre  Oity  9. Election Campaign Financing Trust Fund Contribution.  Delete  11.  Delete  TITLE NAME STREET ADDRESS CITY-ST-ZIP  Delete  TITLE NAME STREET ADDRESS CITY-ST-ZIP  Delete TITLE NAME STREET ADDRESS CITY-ST-ZIP  Delete TITLE NAME STREET ADDRESS CITY-ST-ZIP  Delete TITLE NAME STREET ADDRESS CITY-ST-ZIP  Delete TITLE NAME STREET ADDRESS CITY-ST-ZIP  Delete TITLE NAME STREET ADDRESS CITY-ST-ZIP  Delete TITLE NAME STREET ADDRESS CITY-ST-ZIP  Delete TITLE NAME STREET ADDRESS CITY-ST-ZIP  Delete TITLE NAME STREET ADDRESS CITY-ST-ZIP  Delete TITLE NAME STREET ADDRESS CITY-ST-ZIP  Delete TITLE NAME STREET ADDRESS CITY-ST-ZIP  Delete TITLE NAME STREET ADDRESS CITY-ST-ZIP  Delete TITLE NAME STREET ADDRESS CITY-ST-ZIP  Delete TITLE NAME STREET ADDRESS CITY-ST-ZIP  Delete TITLE NAME STREET ADDRESS CITY-ST-ZIP  Delete TITLE NAME STREET ADDRESS CITY-ST-ZIP  Delete TITLE NAME STREET ADDRESS CITY-ST-ZIP  Delete TITLE NAME STREET ADDRESS CITY-ST-ZIP  Delete TITLE NAME STREET ADDRESS CITY-ST-ZIP	Mailing Address C/O INTEGRATED PROPERTY MGMT. 3435 10TH ST N #201 NAPLES FL 33940 US  3. Mailing Address  Suite, Apt. #, etc.	Mailing Address C/O INTEGRATED PROPERTY MGMT. 3435 10TH \$TS N #201 MAPLES FL 30940 US  3. Mailing Address Suite, Apt. #, etc.   CHECK HERE IF MAKE City & State   4. FEI Number 59-1909895  Zip   Country   5. Certificate of Status Desired   harmonic of the purpose of Changing its registered office or registered agent, or both, in the State of Florida. I City  Gor the purpose of changing its registered office or registered agent, or both, in the State of Florida. I City  9. Election Campaign Financing   S5.00 May Be Added to Fees   Make Che Florida De ITILE NAME   STREET ADDRESS CITY-ST-ZIP   Delete   TITLE   NAME   STREET ADDRESS CITY-ST-ZIP   Delete   TITLE   NAME   STREET ADDRESS CITY-ST-ZIP   Delete   TITLE   NAME   STREET ADDRESS CITY-ST-ZIP   Delete   TITLE   NAME   STREET ADDRESS CITY-ST-ZIP   Delete   TITLE   NAME   STREET ADDRESS CITY-ST-ZIP   Delete   TITLE   NAME   STREET ADDRESS CITY-ST-ZIP   Delete   TITLE   NAME   STREET ADDRESS CITY-ST-ZIP   Delete   TITLE   NAME   STREET ADDRESS CITY-ST-ZIP   DELete   TITLE   NAME   STREET ADDRESS CITY-ST-ZIP   DEL	Mailing Address C/O INTEGRATED PROPERTY MGMT. 3935 IGTH 5T N #201 NAPLES FL 33940 IJS  3. Mailing Address  Suite, Apt. #, etc.   CHECK HERE IF MAKING CHANGES  City & State   4. FEI Number 59-1909895   Ar.  INTEGRATED PROPERTY MGMT. 39. Certificate of Status Desired   58.75 Act. Fee Require  Name Street Address of New Registered Agent  City   FL   Zip Cod  To the purpose of changing its registered diffice or registered agent, or both, in the State of Florida. I am familiar with.  1 and title 4 applicable   WOTE Registered Agent signature required when reinzaling)   DATE  9. Election Campaign Financing   Address   Address of New Registered Agent with address of New Registered Agent with a state of Florida. I am familiar with.  1 and title 4 applicable   WOTE Registered Agent signature required when reinzaling)   DATE  9. Election Campaign Financing   Address   Addre

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:** 

262-3913