2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT #728376

1. Entity Name
HIGH POINT COUNTRY CLUB GROUP TWELVE INC.



FILED May 01, 2008 8:00 am Secretary of State

05-01-2008 90246 029 ****61.25

| | | o, , , , , , , , , , , , , , , , , , , | | | | | | | | |
|--|---|--|--|---|---------------------------------------|---------------------|--|------------------------------------|---------------------------------------|--|
| Principal Place of Business C/O RESORT MGMT 2685 HORSESHOE DR \$ 215 NAPLES, FL 34104 US | | Mailing Address C/O RESORT MGMT 2685 HORSESHOE DR S 215 NAPLES, FL 34104 US | | | - 40001014 - 40001014 | | | | | |
| 2. Principal Place of Business - No P.O. Box # | | 3. Mailing Address | | | | | | | | |
| Suite, Apt. #, etc. | | Suite, Apt. #, etc. | | 0401 | 2008 Ch | g-NP | CR2E037 (12 | 2/06) | | |
| City & State | | City & State | | | Number 9- 276922 8 | 3 | | | plied For Applicable | |
| Zip | Country | Zip | Country | 5. Ce | rtificate of Sta | tus Desired | | 5 Addi Required | | |
| 6. Name and Address of Current Registered Agent | | | | 7. Name and Address of New Registered Agent | | | | | | |
| FIELDS C | HARLES | | Name | | | | | | } | |
| FIELDS, CHARLES 1 HIGH PT CIR 301 NAPLES, FL 34103 | | | Street Address | | s (P.O. Box Number is Not Acceptable) | | | | | |
| | | | | | | | | | | |
| | | | City | | | | FL z | ip Code | | |
| | named entity submits this statement for | the purpose of changing its | registered office or | registered ager | at, or both, in t | he State of Fig | orida. I am familia | ar with, a | and accept | |
| the obligat | ions of registered agent. | | | | | | | | | |
| PIGNATURE | | | | | | | | | | |
| SIGNATURE Signature, typed or printed name of registered agent and talle if applicable (NOTE Registered Agent signature required when renatating) DATE | | | | | | | | | | |
| Filing Fee is \$61.25 Due by May 1, 2008 | | | | | | | | | | |
| | • | 9. Election Cam Trust Fund C | npaign Financing contribution. | \$5.00 Added | May Be to Fees | | lake check pay ida Departmen | | | |
| 10. | • | Trust Fund C | | ∐ Added | to Fees | Flor | | t of Sta | ate | |
| TITLE | OFFICERS AND DIR | Trust Fund C | ontribution. | ADDITIO | to Fees NS/CHANGE | Flor S TO OFFICE | RS AND DIRECT | ORS IN | 10 | |
| TITLE NAME | OFFICERS AND DIR P ZANDER, FRED | Trust Fund C | ontribution. | ADDITIO | to Fees NS/CHANGE | Flor S TO OFFICE | RS AND DIRECT | ORS IN | 10 | |
| TITLE NAME STREET ADDRESS | OFFICERS AND DIR P ZANDER, FRED 1 HIGH POINT CIRCLE W #501 | Trust Fund C | ontribution. | ADDITIO | to Fees NS/CHANGE | Flor S TO OFFICE | RS AND DIRECT | ORS IN | 10 | |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | P ZANDER, FRED 1 HIGH POINT CIRCLE W #501 NAPLES, FL 34103 | Trusi Fund C | ontribution. | ADDITIO | to Fees NS/CHANGE | Flor S TO OFFICE | RS AND DIRECT | ORS IN | 10 | |
| TITLE NAME STREET ADDRESS | OFFICERS AND DIR P ZANDER, FRED 1 HIGH POINT CIRCLE W #501 | Trust Fund C | ontribution. | ADDITIO | to Fees NS/CHANGE | Flor S TO OFFICE | RS AND DIRECT | ORS IN | 10 | |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS | P ZANDER, FRED 1 HIGH POINT CIRCLE W #501 NAPLES, FL 34103 V BRADLEY, JIM 1 HIGH POINT CIRCLE W #206 | Trusi Fund C | ontribution. | ADDITIO | to Fees NS/CHANGE | Flor S TO OFFICE | RS AND DIRECT | ORS IN | 10 | |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME | Due by May 1, 2008 OFFICERS AND DIR P ZANDER, FRED 1 HIGH POINT CIRCLE W #501 NAPLES, FL 34103 V BRADLEY, JIM 1 HIGH POINT CIRCLE W #206 NAPLES, FL 34103 | Trusi Fund C | ontribution. | ADDITIO | to Fees NS/CHANGE | Flor S TO OFFICE | RS AND DIRECT | ORS IN | 10 | |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP | Due by May 1, 2008 OFFICERS AND DIR P ZANDER, FRED 1 HIGH POINT CIRCLE W #501 NAPLES, FL 34103 V BRADLEY, JIM 1 HIGH POINT CIRCLE W #206 NAPLES, FL 34103 D | Trusi Fund C | 11. TITLE NAME STREET ADDRESS CITY - ST - ZIP TITLE NAME STREET ADDRESS CITY - ST - ZIP TITLE | ADDITIO | to Fees NS/CHANGE | Flor S TO OFFICE | RS AND DIRECTION (103) (24) (24) (34) | ORS IN | 10 | |
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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.