

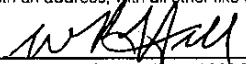


# 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**May 04, 2006 8:00 am**  
**Secretary of State**

05-04-2006 90248 026 \*\*\*\*61.25

<b>DOCUMENT # 730305</b> 1. Entity Name <b>HIGH POINT COUNTRY CLUB, INC.</b>					
Principal Place of Business 1100 HIGH POINT DRIVE NAPLES, FL 34103-248 US			Mailing Address 1100 HIGH POINT DRIVE NAPLES, FL 34103-248 US		
2. Principal Place of Business Suite, Apt. #, etc.			3. Mailing Address Suite, Apt. #, etc.		
City & State			City & State		
Zip		Country		4. FEI Number <b>59-1547403</b>	
5. Certificate of Status Desired <input type="checkbox"/>				<b>\$8.75 Additional Fee Required</b>	
6. Name and Address of Current Registered Agent  <b>SANDCASTLE COMMUNITY MANAGEMENT, INC.</b> <b>1719 TRADE CENTER WAY</b> <b>NAPLES, FL 34109</b>				7. Name and Address of New Registered Agent  Name Street Address (P.O. Box Number is Not Acceptable) City	
8. 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. I am familiar with, and accept the obligations of registered agent.					
SIGNATURE  <small>Signature, typed or printed name of registered agent and title if applicable.</small>				DATE <b>4-24-06</b> <small>(NOTE: Registered Agent signature required when reinstating)</small>	
<b>Filing Fee is \$61.25</b> <b>Due by May 1, 2006</b>		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>		<b>\$5.00 May Be Added to Fees</b>	
<b>Make check payable to Florida Department of State</b>					
<b>10. OFFICERS AND DIRECTORS</b>				<b>11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10</b>	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DT HEALEY, HOWARD 45 HIGH POINT CIR S. NAPLES, FL 34103	<input checked="" type="checkbox"/> Delete	TITLE <i>P</i> NAME STREET ADDRESS CITY-ST-ZIP	John (Jack) Dever, Sr. 21 High Point Circle E. # 402 Naples, Florida 34103	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DP SEMINARO, FRANK 21 HIGH POINT CIR. NAPLES, FL 34103	<input checked="" type="checkbox"/> Delete	TITLE <i>T</i> NAME STREET ADDRESS CITY-ST-ZIP	William (Bill) Hill 37 High Point Circle E. # 504 Naples, Florida 34103	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE <i>S</i> NAME STREET ADDRESS CITY-ST-ZIP	DS RAMSEYER, KAYE 45 HIGH POINT CIRCLE # 102 NAPLES, FL 34103	<input type="checkbox"/> Delete <i>Same</i>	TITLE <i>S</i> NAME STREET ADDRESS CITY-ST-ZIP	Kay Ramseyer 45 High Point Circle # 102 Naples, Florida 34102	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE <i>P</i> NAME STREET ADDRESS CITY-ST-ZIP	DEVER, JACK 21 HIGH POINT CIRCLE # 902 NAPLES, FL 34103	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> 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.					
SIGNATURE:  <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>				Date <b>4/20/06</b> Daytime Phone # <b>239-263-7971</b>	

50018578



02152006 Chg-NP CR2E037 (11/05)