

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 755012

FILED
Jul 14, 2005
Secretary of State

Entity Name: SAINT ANDREWS SOUTH GOLF CLUB, INC.

Current Principal Place of Business:

1901 DEBORAH DRIVE
PUNTA GORDA, FL 33950

New Principal Place of Business:

Current Mailing Address:

1901 DEBORAH DRIVE
PUNTA GORDA, FL 33950

New Mailing Address:

FEI Number: 59-2057048 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

DURST, LESTER E.
115 WEST OLYMPIA AVENUE
PUNTA GORDA, FL 33950 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

_____ Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: HEINE, WARREN
Address: 2061 VIA SEVILLE
City-St-Zip: PUNTA GORDA, FL 33950

Title: TD () Delete
Name: ALOISI, JOHN
Address: 1412 SEA FAN DR.
City-St-Zip: PUNTA GORDA, FL 33950

Title: SD () Delete
Name: EBERT, CHIP
Address: 4111 GINGOLD STREET
City-St-Zip: PORT CHARLOTTE, FL 33948

Title: VP () Delete
Name: KINGSLEY, DONALD
Address: 3912 CROOKED ISLAND DR
City-St-Zip: PUNTA GORDA, FL 33950

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: KAPLAN, RICHARD
Address: 2067 PADRE ISLAND CT
City-St-Zip: PUNTA GORDA, FL 33950

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: SD (X) Change () Addition
Name: HOCK, MARILYN
Address: 715 VIA TUNIS
City-St-Zip: PORT CHARLOTTE, FL 33950

Title: VP (X) Change () Addition
Name: EZRA, MATTHEW
Address: 35024 CAPTIVA COURT
City-St-Zip: PUNTA GORDA, FL 33950

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: JOHN ALOISI

TD

07/14/2005

Electronic Signature of Signing Officer or Director

_____ Date