

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT



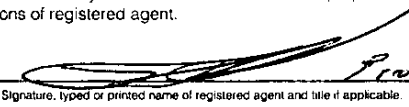
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Apr 30, 2008 8:00 am
Secretary of State

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03312008 Chg-NP CR2E037 (12/06)

DOCUMENT # N01000003280 1. Entity Name CLUB HOMES IV AT HERITAGE GREENS ASSOCIATION, INC.			
Principal Place of Business C/O INTEGRATED PROPERTY MGMT 3435 10TH STREET N #201 NAPLES, FL 34103		Mailing Address C/O INTEGRATED PROPERTY MGMT 3435 10TH STREET N #201 NAPLES, FL 34103	
2. Principal Place of Business - No P.O. Box # 40 Resort Management Suite, Apt. #, etc. 2085 S. Horseshoe Dr. #215		3. Mailing Address Same Suite, Apt. #, etc. Same	
City & State Naples, FL		City & State Naples, FL	
Zip 34104	Country USA	Zip 34104	Country USA
4. FEI Number 65-1112807		Applied For ☐ Not Applicable	
5. Certificate of Status Desired ☐		\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent DEBOEST, RICHARD 1445 HENDRY STREET NORTH FORT MYERS, FL 33917		7. Name and Address of New Registered Agent Name SAMAUCE, MURRELL, CAL, P.A. Street Address (P.O. Box Number is Not Acceptable) 5405 Park Central Court City Naples FL Zip Code 34104	
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  Signature, typed or printed name of registered agent and title if applicable.		DATE 4/28/08 (NOTE: Registered Agent signature required when reinstating)	
Filing Fee is \$61.25 Due by May 1, 2008		9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees	
Make check payable to Florida Department of State			
10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE P NAME JORDAN, JOHN STREET ADDRESS 1729 MORNING SUN LN CITY-ST-ZIP NAPLES, FL 34119	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP 	☐ Change ☐ Addition
TITLE VPTR NAME LEVINE, MATTHEW STREET ADDRESS 1693 MORNING SUN LN CITY-ST-ZIP NAPLES, FL 34119	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP 	☐ Change ☐ Addition
TITLE S NAME JARJOURA, BESSIE STREET ADDRESS 1737 MORNING SUN LN CITY-ST-ZIP NAPLES, FL 34119	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP 	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP 	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP 	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP 	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP 	☐ Change ☐ Addition
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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:  SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		John Jordan, 4/16/08 President Date Daytime Phone #	