

2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000003300

FILED
Jan 06, 2011
Secretary of State

Entity Name: NORTH PORT COUNTRY CLUB ESTATES AND SUMTER GREEN NEIGHBORHOOD ASSOCIATION, INC.

Current Principal Place of Business:

5042 GREENWAY DRIVE
NORTH PORT, FL 34287

New Principal Place of Business:

Current Mailing Address:

5042 GREENWAY DRIVE
NORTH PORT, FL 34287

New Mailing Address:

FEI Number: 59-3171719

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

THALMAN, GARY R TREASUR
5042 GREENWAY DRIVE
NORTH PORT, FL 34287 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: P
Name: GLASS, JAMES
Address: 5041 RICHMOND TERR
City-St-Zip: NORTH PORT, FL 34287

Title: VP
Name: MEONI, RONALD
Address: 5028 GREENWAY DR.
City-St-Zip: NORTH PORT, FL 34287

Title: S
Name: THALMAN, GARY R
Address: 5042 GREENWAY DRIVE
City-St-Zip: NORTH PORT, FL 34287

Title: D
Name: MOEHLING, HERB
Address: 5001 KINGSLEY RD.
City-St-Zip: NORTH PORT, FL 34287

Title: T
Name: THALMAN, GARY R
Address: 5042 GREENWAY DRIVE
City-St-Zip: NORTH PORT, FL 34287

Title: D
Name: LAMPARTER, CARL
Address: 5031 GREENWAY DR.
City-St-Zip: NORTH PORT, FL 34287

I hereby 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 all other like empowered.

SIGNATURE: GARY R. THALMAN

TREA

01/06/2011

Electronic Signature of Signing Officer or Director

Date