

**2007 NOT-FOR-PROFIT CORPORATION
ANNUAL REPORT**

FILED
Jan 11, 2007 08:00 AM
Secretary of State

DOCUMENT # N04000004220

1. Entity Name
CAPE COD NATIONAL GOLF FOUNDATION, INC.



Principal Place of Business
**1345 SPYGLASS LANE
NAPLES, FL 34102**

Mailing Address
**1345 SPYGLASS LANE
NAPLES, FL 34102**



01052007 No Chg-NP CR2E037 (4/06)

DO NOT WRITE IN THIS SPACE

4. FEI Number
56-2464767

Applied For
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

**PFEFFER, JOHN R
1345 SPYGLASS LANE
NAPLES, FL 34102**

**DO NOT WRITE
IN THIS SPACE**

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.

(NOTE: Registered Agent signature required when reinstating)

DATE

**Filing Fee is \$61.25
Due by May 1, 2007**

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

000000583524
01/11/07-80075-010 61.25

10. OFFICERS AND DIRECTORS

TITLE	PD
NAME	PFEFFER, JOHN R
STREET ADDRESS	1345 SPYGLASS LN
CITY-ST-ZIP	NAPLES, FL 34102
TITLE	VPD
NAME	PFEFFER, MELINDA B
STREET ADDRESS	1345 SPYGLASS LN
CITY-ST-ZIP	NAPLES, FL 34102
TITLE	STD
NAME	PFEFFER, DOUGLAS J
STREET ADDRESS	3 COVE LANDING
CITY-ST-ZIP	HARWICH, MA 02645
TITLE	D
NAME	ENLOW, WILLIAM ESQ
STREET ADDRESS	1034 WOODLAND AVE
CITY-ST-ZIP	SPRINGFIELD, IL 62704
TITLE	D
NAME	PFEFFER, STEVEN S ESQ
STREET ADDRESS	15018 S 19TH WAY
CITY-ST-ZIP	PHOENIX, AZ 85048
TITLE	D
NAME	PFEFFER, THOMAS B
STREET ADDRESS	169 ALBANY AVE
CITY-ST-ZIP	KINGSTON, NY 12401

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IN THIS SPACE**

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:

John R. Pfeffer, Pres.
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Jan. 11, 2007 (239) 272-1408
Date Daytime Phone #

John R. Pfeffer