2008 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# N05000001890

FILED Sep 12, 2008 Secretary of State

Entity Name: HERITAGE BAY GOLF & COUNTRY CLUB, INC.

Current Principal Place of Business:

New Principal Place of Business:

11691 GATEWAY BOULEVARD

10481 BEN C PRATT/6 MILE CYPRESS PARKWAY

FT. MYERS, FL 339166

SUITE 203 FT. MYERS, FL 33913

Current Mailing Address:

New Mailing Address:

11691 GATEWAY BOULEVARD

10481 BEN C PRATT/6 MILE CYPRESS PARKWAY

FT. MYERS, FL 33966

SUITE 203 FT. MYERS, FL 33913

SARVER, HELEN I

FEI Number: 20-2643036

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

Name and Address of New Registered Agent:

SHIELDS, CHRISTOPHER J 1833 HENDRY STREET FT. MYERS, FL 33901

SUITE 203

FT. MYERS, FL 33913 US

11691 GATEWAY BOULEVARD

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.

Name:

Address:

SIGNATURE: CHRISTOPHER J. SHIELDS

09/12/2008

Electronic Signature of Registered Agent

FEI Number Applied For ()

Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

(X) Change () Addition

10481 BEN C PRATT/6 MILE CYPRESS PARKWAY

() Delete Name:

BURDETT, ANTHONY J

10481 BEN C PRATT/6 MILE CYPR PKWY. Address:

City-St-Zip: FT. MYERS, FL 33966

Title: () Delete

MCMURRAY, DARIN Name:

Address: 10481 BEN C PRATT/6 MILE CYPR PKWY

City-St-Zip: FT. MYERS, FL 33966

Title: STD () Delete

BILLUPS, JOHN Name:

10481 BEN C PRATT/6 MILE CYPR PKWY Address:

City-St-Zip: FT. MYERS, FL 33966 City-St-Zip: FT. MYERS, FL 33966

BURDETT, ANTHONY J

Title: (X) Change () Addition

Name: MCMURRAY, DARIN

Address: 10481 BEN C PRATT/6 MILE CYPRESS PARKWAY

City-St-Zip: FT. MYERS, FL 33966

Title: STD (X) Change () Addition

Name: BILLUPS, JOHN

10481 BEN C PRATT/6 MILE CYPRESS PARKWAY Address:

City-St-Zip: FT. MYERS, FL 33966

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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: ANTHONY J. BURDETT

PD

09/12/2008