

2008 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT

FILED
Jun 17, 2008
Secretary of State

DOCUMENT# N39323

Entity Name: GLEN EAGLE GOLF & COUNTRY CLUB, INC.

Current Principal Place of Business:

1403 GLEN EAGLE BOULEVARD
NAPLES, FL 34104 US

New Principal Place of Business:

Current Mailing Address:

1403 GLEN EAGLE BOULEVARD
NAPLES, FL 34104 US

New Mailing Address:

FEI Number: 65-0217318 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SANBORN, EARLE
1403 GLEN EAGLE BLVD.
NAPLES, FL 34104 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: BASTOW, BRYAN
Address: 1403 GLEN EAGLE BLVD.
City-St-Zip: NAPLES, FL 34104 US

Title: VPD () Delete
Name: CROWHURST, PAUL
Address: 1403 GLEN EAGLE BLVD.
City-St-Zip: NAPLES, FL 34104 US

Title: TD () Delete
Name: ROSINSKI, MARTIN
Address: 1403 GLEN EAGLE BLVD
City-St-Zip: NAPLES, FL 34104

Title: SD () Delete
Name: WALTERS, BARBARA
Address: 1403 GLEN EAGLE BLVD
City-St-Zip: NAPLES, FL 34104 US

Title: D () Delete
Name: MARTELL, ROBERT
Address: 1403 GLEN EAGLE BLVD.
City-St-Zip: NAPLES, FL 34104 US

Title: D () Delete
Name: GREGORY, RICHARD
Address: 1403 GLEN EAGLE BLVD.
City-St-Zip: NAPLES, FL 34104 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: VP (X) Change () Addition
Name: BASTOW, BRYAN
Address: 1403 GLEN EAGLE BLVD.
City-St-Zip: NAPLES, FL 34104 US

Title: D (X) Change () Addition
Name: LEIBFRIED, HELEN
Address: 1403 GLEN EAGLE BLVD.
City-St-Zip: NAPLES, FL 34104 US

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

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

Title: PD (X) Change () Addition
Name: MARTELL, ROBERT
Address: 1403 GLEN EAGLE BLVD.
City-St-Zip: NAPLES, FL 34104 US

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

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: EARLE O. SANBORN

Electronic Signature of Signing Officer or Director

CONT

06/17/2008

Date