# 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED**
**Apr 13, 2006**
**Secretary of State**

DOCUMENT# N43020

**Entity Name:** INTERLACHEN ON THE GREEN TWO ASSOCIATION, INC.

**Current Principal Place of Business:**

1044 CASTELLO DRIVE
SUITE 206
NAPLES, FL 33940

**New Principal Place of Business:**

1044 CASTELLO DRIVE
SUITE 206
NAPLES, FL 34103

**Current Mailing Address:**

1044 CASTELLO DRIVE
SUITE 206
NAPLES, FL 34103 US

**New Mailing Address:**

**FEI Number: 65-0268284** **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

SOUTHWEST PROPERTY MANAGEMENT CORP.
1044 CASTELLO DRIVE
SUITE 206
NAPLES, FL 34103 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: D ( ) Delete
Name: CORLESS, HARRY,
Address: 6770 PELICAN BAY BLVD. #243
City-St-Zip: NAPLES, FL

Title: D ( ) Delete
Name: CRAIG, GORDON
Address: 6770 PELICAN BAY BLVD, #222
City-St-Zip: NAPLES, FL 34108

Title: TD ( ) Delete
Name: GREEN, WILLIAM
Address: 6770 PELICAN BLVD. #233
City-St-Zip: NAPLES, FL 34108

Title: S ( ) Delete
Name: CLAYTON, JIM
Address: 6770 PELICAN BAY BLVD, #242
City-St-Zip: NAPLES, FL 34108

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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

Title: P (X) Change ( ) Addition
Name: CRAIG, GORDON
Address: 6770 PELICAN BAY BLVD, #222
City-St-Zip: NAPLES, FL 34108

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

Title: S (X) Change ( ) Addition
Name: CLAYDON, JIM
Address: 6770 PELICAN BAY BLVD, #242
City-St-Zip: NAPLES, FL 34108

I hereby certify that the information supplied with this filing does not qualify for the 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: GORDON CRAIG P 04/13/2006

Electronic Signature of Signing Officer or Director — Date