2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N43020

FILED Apr 16, 2008 Secretary of State

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

Current Principal Place of Business:		New Principal Place of Business:			
1044 CAST SUITE 206 NAPLES, F					
Current Mailing Address:		New Mailing Address:			
	ΓELLO DRIVE				
SUITE 206 NAPLES, F		S			
FEI Number:	65-0268284	FEI Number Applied For ()	FEI Number Not Appl	icable ()	Certificate of Status Desired ()
Name and	Address of C	urrent Registered Agent:	Name and	Address of	New Registered Agent:
1044 CAST SUITE 206	ΓELLO DRIVE	Y MANAGEMENT CORP.			
	named entity o	ubmits this statement for the I	purpose of changing i	ts registered	office or registered agent, or bot
	of Florida.	abilitis tills statement for the	,,		
in the State	of Florida.	abilità tilla statement for the p	,,		
n the State	e of Florida.	ic Signature of Registered Ag			Date
in the State	e of Florida.	ic Signature of Registered Ag	ent	S/CHANGES	Date S TO OFFICERS AND DIRECTO
in the State SIGNATUF OFFICERS Title: Name: Address:	e of Florida. RE: Electron S AND DIRECT S () WOJCIK, JOE	ic Signature of Registered Ag FORS: Delete BAY BLVD., #213	ent		
in the State SIGNATUF OFFICERS Title: Name: Address: City-St-Zip: Title: Name: Address:	e of Florida. RE: Electron S AND DIRECT S () WOJCIK, JOE 6770 PELICAN I NAPLES, FL 34 P () CRAIG, GORDO	ic Signature of Registered Ag FORS: Delete BAY BLVD., #213 108 Delete N BAY BLVD, #222	ent ADDITION Title: Name: Address:	(S TO OFFICERS AND DIRECTO
in the State	E of Florida. RE: Electron S AND DIRECT S () WOJCIK, JOE 6770 PELICAN I NAPLES, FL 34 P () CRAIG, GORDO 6770 PELICAN I NAPLES, FL 34	ic Signature of Registered Ag FORS: Delete BAY BLVD., #213 108 Delete N BAY BLVD, #222 108 Delete M BLVD. #233	ent ADDITION Title: Name: Address: City-St-Zip: Title: Name: Address:	() D (; GREEN, WILL	S TO OFFICERS AND DIRECTOR) Change () Addition) Change () Addition X) Change () Addition LIAM N BLVD. #233

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: GORDON CRAIG P 04/16/2008