

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N93000005224

FILED
Apr 26, 2006
Secretary of State

Entity Name: BAY COLONY GOLF CLUB, INC.

Current Principal Place of Business:

9740 BENT GRASS BEND
NAPLES, FL 34108 US

New Principal Place of Business:

Current Mailing Address:

9740 BENT GRASS BEND
NAPLES, FL 34108 US

New Mailing Address:

FEI Number: 65-0473088

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

COLEMAN, KEVIN
4001 TAMiami TRAIL NORTH, SUITE 300
NAPLES, FL 34103 US

Name and Address of New Registered Agent:

MAZZITELLI, MARTHA M CFO
9740 BENT GRASS BEND
NAPLES, FL 34108 US

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: MARTHA MAZZITELLI

04/26/2006

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: DP () Delete
Name: GUNTHER, DON J
Address: 9740 BENT GRASS BEND
City-St-Zip: NAPLES, FL 34108

Title: DV () Delete
Name: FLIGG, JAMES
Address: 9740 BENT GRASS BEND
City-St-Zip: NAPLES, FL 34108

Title: DT () Delete
Name: DEETS, KING
Address: 9740 BENT GRASS BEND
City-St-Zip: NAPLES, FL 34108

Title: DS () Delete
Name: REALE, BRUCE
Address: 9740 BENT GRASS BEND
City-St-Zip: NAPLES, FL 34108

Title: D () Delete
Name: EATON, ROBERT
Address: 9675 MASHIE CRT
City-St-Zip: NAPLES, FL 34108

Title: D () Delete
Name: HARRISON, HANK
Address: 9740 BENT GRASS BEND
City-St-Zip: NAPLES, FL 34108

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: DT (X) Change () Addition
Name: HUBERS, DAVID
Address: 9740 BENT GRASS BEND
City-St-Zip: NAPLES, FL 34108

Title: DS (X) Change () Addition
Name: CAVALIER, E.M.
Address: 9740 BENT GRASS BEND
City-St-Zip: NAPLES, FL 34108

Title: D (X) Change () Addition
Name: EATON, ROBERT
Address: 9740 BENT GRASS BEND
City-St-Zip: NAPLES, FL 34108

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

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: MARTHA MAZZITELLI

CFO

04/26/2006

Electronic Signature of Signing Officer or Director

Date