

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 05, 2007 8:00 am
Secretary of State

02-05-2007 90089 027 ****61.25

DOCUMENT # N96000005062					
1. Entity Name BIG CYPRESS GOLF AND COUNTRY CLUB ESTATES HOMEOWNERS ASSOCIATION, INC.					
Principal Place of Business P.O. BOX 10424 NAPLES, FL 34101 US			Mailing Address P.O. BOX 10424 NAPLES, FL 34101 US		
2. Principal Place of Business - No P.O. Box #		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State			
Zip	Country	Zip	Country	4. FEI Number 65-0252952	
5. Certificate of Status Desired <input type="checkbox"/>				\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent WOLSKI, JOHN R 21 CYPRESS POINT DR NAPLES, FL 34105			7. Name and Address of New Registered Agent Name <u>JOHN R WOLSKI</u> Street Address (P.O. Box Number is Not Acceptable) <u>21 CYPRESS POINT DR.</u> City <u>NAPLES</u> <u>FL</u> Zip Code <u>34105</u>		
8. 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. I am familiar with, and accept the obligations of registered agent.					
SIGNATURE <u>JOHN R WOLSKI</u> <u>JANUARY 24, 2007</u> <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE</small>					
Filing Fee is \$61.25 Due by May 1, 2007		9. Election Campaign Financing <input type="checkbox"/>		\$5.00 May Be Added to Fees	
10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD RULKER, ROANLD L 72 CYPRESS POINT DR NAPLES, FL 34105	<input checked="" type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D WOLSKI, JOHN R 21 CYPRESS POINT DR NAPLES, FL 34105	<input type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D FINIGAN, RICHARD T 293 MELJEN DR NAPLES, FL 34105	<input type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D LYKINS, CHARLES 307 MEL JEN DR NAPLES, FL 34105	<input checked="" type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D HARTWIG, JERRY 256 BURNING TREE DR NAPLES, FL 34105	<input type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete				
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.					
SIGNATURE: <u>RICHARD T FINIGAN / Richard Finigan / 1-24-07 / 239-213-3322</u> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #</small>					