

# 2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N98000003928

FILED  
Apr 26, 2012  
Secretary of State

**Entity Name:** CLUB HOMES II AT HERITAGE GREENS ASSOCIATION, INC.

**Current Principal Place of Business:**

C/O RESORT MANAGEMENT  
2685 S. HORSESHOE DR #215  
NAPLES, FL 34104

**New Principal Place of Business:**

C/O RESORT MANAGEMENT  
2685 HORSESHOE DR. S. #215  
NAPLES, FL 34104

**Current Mailing Address:**

C/O RESORT MANAGEMENT  
2685 S. HORSESHOE DR #215  
NAPLES, FL 34104

**New Mailing Address:**

C/O RESORT MANAGEMENT  
2685 HORSESHOE DR. S. #215  
NAPLES, FL 34104

**FEI Number:** 65-0881551

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

BOWES, STUART  
1967 MORNING SUNLANE  
NAPLES, FL 34119 US

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

SAMOUCÉ, MURRELL & GAL, P.A.  
5405 PARK CENTRAL COURT  
NAPLES, FL 34109 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: ROB SAMOUCÉ

04/26/2012

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: P  
Name: BOWES, STUART  
Address: 1967 MORNING SUN LANE  
City-St-Zip: NAPLES, FL 34119

Title: VP  
Name: PHILLIPS, DIANE  
Address: 1943 MORNING SUN LANE  
City-St-Zip: NAPLES, FL 34119

Title: T  
Name: VELASQUEZ, SANDRA  
Address: 1895 MORNING SUN LANE  
City-St-Zip: NAPLES, FL 34119

Title: S  
Name: GEISER, CHRISTINE  
Address: 1947 MORNING SUN LANE  
City-St-Zip: NAPLES, FL 34119

Title: D  
Name: DIMUCCIO, RALPH  
Address: 1983 MORNING SUN LANE  
City-St-Zip: NAPLES, FL 34119

I hereby 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 all other like empowered.

SIGNATURE: STUART BOWES

P

04/26/2012

Electronic Signature of Signing Officer or Director

Date