

# 2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N99000002507

FILED  
Jan 05, 2012  
Secretary of State

**Entity Name:** CEDAR HAMMOCK GOLF & COUNTRY CLUB, INC.

**Current Principal Place of Business:**

8660 CEDAR HAMMOCK BOULEVARD  
NAPLES, FL 34112

**New Principal Place of Business:**

**Current Mailing Address:**

8660 CEDAR HAMMOCK BOULEVARD  
NAPLES, FL 34112

**New Mailing Address:**

**FEI Number:** 65-0921216

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

SAMOUCÉ, MURRELL, & GAL, P.A.  
4505 PARK CENTRAL CT  
NAPLES, FL 34109 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:** P  
**Name:** CARTER, EDWARD  
**Address:** 8560 CEDAR HAMMOCK CIRCLE, #914  
**City-St-Zip:** NAPLES, FL 34112

**Title:** V  
**Name:** MATTHEWS, LAWRENCE  
**Address:** 3800 SAWGRASS WAY, #3131  
**City-St-Zip:** NAPLES, FL 34112

**Title:** S  
**Name:** ARCHER, WILLIAM  
**Address:** 3770 SAWGRASS WAY, #3441  
**City-St-Zip:** NAPLES, FL 34112

**Title:** T  
**Name:** SWAN, CAROL  
**Address:** 3606 CEDAR HAMMOCK CT  
**City-St-Zip:** NAPLES, FL 34112

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:** EDWARD CARTER

P

01/05/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date