

# 2010 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P92000012348

**FILED**  
**Apr 13, 2010**  
**Secretary of State**

**Entity Name:** CAPE HAZE GOLF & COUNTRY CLUB CORPORATION

**Current Principal Place of Business:**

4005 CAPE HAZE DR.  
CAPE HAZE, FL 33947 US

**New Principal Place of Business:**

**Current Mailing Address:**

4005 CAPE HAZE DR.  
CAPE HAZE, FL 33947 US

**New Mailing Address:**

FEI Number: 65-0382934

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

ALEXANDER, LARRY B  
505 S. FLAGLER DRIVE  
SUITE 1100  
WEST PALM BEACH, FL 334013475 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

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: DPST  
Name: LITTLESTAR, GARY D  
Address: 4005 CAPE HAZE DR  
City-St-Zip: CAPE HAZE, FL

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 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: GARY D. LITTLESTAR

DPST

04/13/2010

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

\_\_\_\_\_ Date