

# **2011 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P97000014480

**Entity Name:** CHARLOTTE GOLF PARTNERS, INC.

**FILED**  
**Mar 08, 2011**  
**Secretary of State**

**Current Principal Place of Business:**

4389 LIBRARY ST  
PT CHARLOTTE, FL 33948

**New Principal Place of Business:**

**Current Mailing Address:**

4389 LIBRARY ST  
PT CHARLOTTE, FL 33948

**New Mailing Address:**

**FEI Number:** 59-3428277

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

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

ORR, BRUCE  
303 OCALA ROAD  
BELLAIRE, FL 33756 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: MOOTZ, MATTHEW T  
Address: 4389 LIBRARY ST  
City-St-Zip: PT CHARLOTTE, FL 33948

Title: VS  
Name: CUBBA, PETER J  
Address: 22725 GREATER MACK AVENUE  
City-St-Zip: SAINT CLAIR SHORES, MI 48080

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: MATTHEW MOOTZ

P

03/08/2011

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

\_\_\_\_\_  
Date