## **2021 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

**DOCUMENT# 725478** 

Entity Name: HIGH POINT COUNTRY CLUB GROUP TWO, INC.

FILED
Mar 18, 2021
Secretary of State
9370964628CC

## **Current Principal Place of Business:**

53 HIGH POINT CIRCLE NAPLES. FL 34103

# **Current Mailing Address:**

% GULF VIEW PROPERTY MANAGEMENT 2335 9TH ST., N., SUITE 505 NAPLES, FL 34103 US

FEI Number: 59-1630145 Certificate of Status Desired: No

## Name and Address of Current Registered Agent:

GULF VIEW PROPERTY MGMT, INC. 2335 9TH STREET N SUITE 505 NAPLES, FL 34103 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:

Electronic Signature of Registered Agent

Date

#### Officer/Director Detail:

Title VP, DIRECTOR Title DIRECTOR

Name COOMBES, KEVIN Name RAYNER, EDWIN

Address 53 HIGH POINT CIR 209 Address 53 HIGH POINT CR W #311

City-State-Zip: NAPLES FL 34103 City-State-Zip: NAPLES FL 34103

Title PRESIDENT, D Title SECRETARY, DIRECTOR

Name SKILLING, MICHAEL Name DUNLEVY, JERRY

Address 53 HIGH POINT CIR. #203 Address 53 HIGH POINT CIR, 201

City-State-Zip: NAPLES FL 34103 City-State-Zip: NAPLES FL 34103

Title TREASURER, DIRECTOR

Name THOREN, JOYCE

Address 32300 OINE GROVE RD

City-State-Zip: RACINE OH 45771

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: MICHAEL SKILLING

Electronic Signature of Signing Officer/Director Detail

PRESIDENT

03/18/2021