

Return of Organization Exempt From Income Tax
Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung benefit trust or private foundation)

OMB No. 1545-0047

Z64832_1

Internal Revenue Service

► The organization may have to use a copy of this return to satisfy state reporting requirements.

Α	For the 20	004 calendar year, or tax year beginning	and a	nding		
_		C Name of organization	anu c		D Employer ide-4	fication number
ם (Check if applicable:	Flease			D Employer identi	neation number
_	Address	use IRS label or			F0 202	~ ~ C O
<u> </u>	change	print or SUNTREE COUNTRY CLUE		1	59-303	
Ļ	change	See Number and Street (of F.O. DOX II mail is t	•	Room/suite	E Telephone num	
Ļ	return	Specific ONE COUNTRY CLUB DR			(321)2	12-6230
	Final	tions. City or town, state or country, and ZIP + 4			F Accounting method:	Cash X Accrual
	Amende return	MEDDOORNE, FL 32940			Other (specify)	
	Applicati pending	- occion so i(c)(o) organizations and 4347 (a)		H and I are not app	licable to section	527 organizations.
		must attach a completed Schedule A (Form 9	190 or 990-EZ).	H(a) Is this a group r	return for affiliates?	Yes X No
G 1	Website:	N/A		H(b) If "Yes," enter nu	umber of affiliates	•
		ion type (check only one) ► X 501(c) (7) ◀ (inse	ert no.) 4947(a)(1) or 52			
		e 🕨 🔲 if the organization's gross receipts are nor		(If "No," attach a	list.)	
		on need not file a return with the IRS; but if the organiz		H(d) is this a separat	red by a group rulin	g? Yes X No
		l, it should file a return without financial data. Some sta		I Group Exemption		<u> </u>
		· · · · · · · · · · · · · · · · · · ·	• • • • •			s not required to attach
1 (Gross rec	eipts: Add lines 6b, 8b, 9b, and 10b to line 12	5,850,884.		90, 990-EZ, or 990-	
		Revenue, Expenses, and Changes in	Net Assets or Fund Rai		,,,,	. ,,
g.F.				anocs	- Individual	
		Contributions, gifts, grants, and similar amounts recei	'	1		
		Direct public support		 	 \$3.5	
		Indirect public support				
		Government contributions (grants)		<u> </u>		
	d	Total (add lines 1a through 1c) (cash \$	noncash \$			0.
ĺ	2	Program service revenue including government fees a	nd contracts (from Part VII, line 93)		2	941,394.
)	3	Membership dues and assessments			3	2,871,815.
		Interest on savings and temporary cash investments				25.
>	5	Dividends and interest from securities			1 1	
2 -	6 a	Gross rents	6a			
, o		Less: rental expenses				
	I .	Net rental income or (loss) (subtract line 6b from line		*		
ت	7	Other investment income (describe	ou)	***************************************) 7	
3 5		Gross amount from sales of assets other	(A) Securities	(B) Other		
SUUC. 6 Revenue				81,4	10	
Re	1	than inventory				
		Less: cost or other basis and sales expenses		58,5	St. 32.003	
		Gain or (loss) (attach schedule)				00 061
	1	Net gain or (loss) (combine line 8c, columns (A) and (1 8d	22,861.
	9	Special events and activities (attach schedule). If any a	imount is from gaming, check here			
	500	Gross revenue (not including \$	of contributions	1		
1	K Line	reported on line 19)	9a			
1	b	Less; direct expenses other than fundraising expenses	s 9b			
=1	3114	Net income or (loss from special events (subtract line	9b from line 9a)		9c	
[3]	100	Cross sales of inventory loss returns and allowerses	100	1 225 0	20.	
. 1		Toss sales of memory, less returns and anowances	10b	802,7	7/24/7/5/9/00	
	O[2	Gross profit or (loss) from sales of inventory (attach s	chedule) (subtract line 10b from line	10a) STMT		1,033,186.
ـــا	11	Other revenue (from Part VII, line 103)	• •			120,311.
	12	Total revenue (add lines 1d, 2, 3, 4, 5, 6c, 7, 8d, 9c, 1	ne and 11)		12	4,989,592.
	13					4,000,002.
es	14	Program services (from line 44, column (B))			10	
ŠŲ	14	Management and general (from line 44, column (C))				
Expenses	15					
ш	1					F 050 100
	17	Total expenses (add lines 16 and 44, column (A))			17	5,069,130.
cn	18	Excess or (deficit) for the year (subtract line 17 from li	ne 12)		18	<u><79,538.</u> >
Net	19	Net assets or fund balances at beginning of year (from	line 73, column (A))		19	5,662,118.
ZSZ		Other changes in net assets or fund balances (attach e	xplanation) SEE	STATEMENT	3 20	<45,395.>
_	21	Net assets or fund balances at end of year (combine li				5,537,185.
4230	001	HA For Privacy Act and Panerwork Reduction Act				Form 000 (2004)

423011 01-13-05

Form 990 (2004)

Part IV Balance Sheets

	ere required, attached schedules and amounts w uld be for end-of-year amounts only.	vithin the desci	ription column	(A) Beginning of year		(B) End of year	
45	Cash - non-interest-bearing			232,657.	45	373,6	555
46	Savings and temporary cash investments				46		
		1 1			1.00 m		
	Accounts receivable		606,944.	COC 440	7,32,5		
6	Less; allowance for doubtful accounts	47b	039739858888883878037888898	606,410.	47c	606,9	<u> 44</u>
	Di Lasa sasaisaki	AVAILABATION A BOUNDARY OF			3.4		
48 a							
	Less: allowance for doubtful accounts				48c		
49 50	Grants receivable				49		
30	and key employees				50		
3 51 .	Other notes and loans receivable	510	90,044.		30		
51 a	Less: allowance for doubtful accounts	51a	70,044.		51c	90,0	1//
52	Inventories for sale or use			166,461.		126,9	
53	Prepaid expenses and deferred charges	••••••		112,132.		111,5	
54	Investments - securities	▶ [Cost FMV		54		,
1 * *	Investments - land, buildings, and				(150,10 %) (150,10 %)		
	equipment: basis	55a			\$164 134 \$164 134		
					\$\cdot\ \$		
	Less: accumulated depreciation	55b			55c		
56	Investments - other				56		
57 a	Land, buildings, and equipment; basis	57a 1	1,928,588.		380 m 1 10.157		
b	Less: accumulated depreciation STMT	57b	5,608,666.	6,691,453.		6,319,9	922
58	Land, buildings, and equipment: basis Less: accumulated depreciation STMT 11 Other assets (describe	SEE STAT		17,450.		67,4	
	T	r 74)		7 006 560		7 606 4	101
59	Total assets (add lines 45 through 58) (must equal			7,826,563.		7,696,4	
60	Accounts payable and accrued expenses			266,734.	60	396,8	004
61 62	Grants payable			343,519.		348,8	211
63	Deferred revenue	 vnlovane		343,313.	63		<u> </u>
	a Tax-exempt bond liabilities				64a		
3 04	b Mortgages and other notes payable			1,491,667.		1,378,5	528
65	Other liabilities (describe REFUNDABLE	TRTAT.	MEMBERS	62,525.		35,0	
00	Other manifes (describe > ITHE OTIDITE	3 11(11111	TIBRIBERS /	02,323.	00		,,,
66	Total liabilities (add lines 60 through 65)			2,164,445.	66	2,159,2	296
Orga	unizations that follow SFAS 117, check here 🕨 🔯	and complete	lines 67 through				
	69 and lines 73 and 74.						
67	Unrestricted			5,662,118.	67	5,537,1	185
68	Temporarily restricted				68		
69	Permanently restricted				69		
Orga	anizations that do not follow SFAS 117, check here 🕨	► and co	mplete lines				-
67 68 69 0rgz 70 71 72 73	70 through 74.						
70	Capital stock, trust principal, or current funds		<i>.</i>		70		
71	Paid-in or capital surplus, or land, building, and equ				71		
72	Retained earnings, endowment, accumulated incom	e, or other funds	s		72		
73	Total net assets or fund balances (add lines 67 thr						
	column (A) must equal line 19; column (B) must eq			5,662,118.	73	5,537,1	
74	Total liabilities and net assets / fund balances (ad			7,826,563.	74	7,696,4	181

Form 990 is available for public inspection and, for some people, serves as the primary or sole source of information about a particular organization. How the public perceives an organization in such cases may be determined by the information presented on its return. Therefore, please make sure the return is complete and accurate and fully describes, in Part III, the organization's programs and accomplishments.

		COUNTRY CLUB,	_INC.		<u>59-3036</u>	
Pa	Reconciliation of Revenu Financial Statements wit Return			ciliation of Exp ial Statements		
	Total revenue, gains, and other support	30 24.5	a Total expenses and I	osses per		
	per audited financial statements	a 5,792,326.	audited financial stat	ements	a 5	5,871,86 4.
b	Amounts included on line a but not on line 12, Form 990:		b Amounts included or line 17, Form 990:	i ime 'a por uor ou		
(1)	Net unrealized gains		(1) Donated services and use of facilities	\$		
	on investments\$		(2) Prior year adjustmen	its		
(2)	Donated services		reported on line 20,			
(2)	and use of facilities \$		Form 990	\$		
(3)	year grants \$		line 20, Form 990	\$		
(4)	Other (specify):		(4) Other (specify):			
	<u></u> \$			\$ 802,7		
	Add amounts on lines (1) through (4)		Add amounts on line			802,734.
	Line a minus line b	c 5,792,326.	c Line a minus line b d Amounts included or		D c 5	5,069,130.
u	990 but not on line a;		990 but not on line a			
(1)	Investment expenses		(1) Investment expenses	3		
	not included on		not included on			
	line 6b, Form 990\$		line 6b, Form 990	\$		
	Other (specify): TMT 8 \$ <802,734.>		(2) Other (specify):	Φ.		
<u> </u>	TMT 8 \$ <802,734.> Add amounts on lines (1) and (2)▶		> Add amounts on line	_\$ s (1) and(2)	d	
е	Total revenue per line 12, Form 990	(002,731)	e Total expenses per lii		···· • • • • • • • • • • • • • • • • •	<u></u>
	(line c plus line d)	e 4,989,592.	(line c plus line d)		▶ e 5	,069,130.
Pa	rt V List of Officers, Directors, 7	rustees, and Key E	mployees (List each on	e even if not comper	isated.)	
	(A) Name and address		(B) Title and average hours per week devoted to position	(C) Compensation (If not paid, enter	(D) Contributions employee benef plans & deferred compensation	(E) Expense account and other allowances
SE	E ATTACHED STATEMENT	2	Former		Composidation	
			PART-TIME	0.	0	0.
	Officers and directors serve in	a				
	voluntary capacity and receive					ĺ
	 compensation for serving as st 	ıch.				
		·				
			,			
			- 4-1114			
	Did any officer, director, trustee, or key employee re					
	organizations, of which more than \$10,000 was pro	vided by the related organiza	nonsen res, anden schedu	le. ▶ Yes	<u>V</u> MΩ	Form 000 (000 t)
42303	1 01-13-05					Form 990 (2004)

	990 (2004) SUNTREE COUNTRY CLUB, INC. 59-3036	<u>758</u>		Page 5
Pa	t·VI Other Information	r	Yes	No
76	Did the organization engage in any activity not previously reported to the IRS? If "Yes," attach a detailed description of each activity	76		<u>X</u>
77	Were any changes made in the organizing or governing documents but not reported to the IRS?	77	- 6	X
	If "Yes," attach a conformed copy of the changes.			ألندائه.
78 a	Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return?	78a	X	
b	If "Yes," has it filed a tax return on Form 990-T for this year?	78b_	X	
79	Was there a liquidation, dissolution, termination, or substantial contraction during the year?	79_	7.5 %	_X
	If "Yes," attach a statement	23 / S		73, 5,5
80 a	Is the organization related (other than by association with a statewide or nationwide organization) through common membership,			
	governing bodies, trustees, officers, etc., to any other exempt or nonexempt organization?	80a		X
b	If "Yes," enter the name of the organization			` ` <u> </u>
	and check whether it is exempt or nonexempt.			
	Enter direct or indirect political expenditures. See line 81 instructions 81a 0.			
	Did the organization file Form 1120-POL for this year?	81b_		_X_
82 a	Did the organization receive donated services or the use of materials, equipment, or facilities at no charge or at substantially less than	00-		v
_	fair rental value? If "Yes," you may indicate the value of these items here. Do not include this amount as revenue in Part I or as an	82a_	8 5	_X
D		1		
Q2 ~	expense in Part II. (See instructions in Part III.) Did the organization comply with the public inspection requirements for returns and exemption applications?	83a	X	الكاسسا
	Did the organization comply with the disclosure requirements relating to quid pro quo contributions?	83b		
84 a		84a	X	
	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not	A. 36.5		
Ü	· · · · · · · · · · · · · · · · · · ·	84b	Х	المستثند
85	tax deductible? 501(c)(4), (5), or (6) organizations. a Were substantially all dues nondeductible by members? N/A	85a		
ь	Did the organization make only in-house lobbying expenditures of \$2,000 or less?	85b		_
_	If "Yes" was answered to either 85a or 85b, do not complete 85c through 85h below unless the organization received a waiver for proxy tax	100		
	owed for the prior year.			
С	Dues, assessments, and similar amounts from members 85c N/A			
d	Section 162(e) lobbying and political expenditures 85d N/A	1		;
e	Aggregate nondeductible amount of section 6033(e)(1)(A) dues notices 85e N/A			
f	Taxable amount of lobbying and political expenditures (line 85d less 85e) 85f N/A		ر ر ایمانی ا	
g	Does the organization elect to pay the section 6033(e) tax on the amount on line 85f?	85g		
h	If section 6033(e)(1)(A) dues notices were sent, does the organization agree to add the amount on line 85f to its reasonable estimate of dues			
	allocable to nondeductible lobbying and political expenditures for the following tax year?	85h		
86	501(c)(7) organizations. Enter: a Initiation fees and capital contributions included on line 12 86a		el el	
b	Gross receipts, included on line 12, for public use of club facilities 86b 706, 139.	(*) A	m, ' '	11. 1
87	501(c)(12) organizations. Enter: a Gross income from members or shareholders 87a N/A			
b	Gross income from other sources. (Do not net amounts due or paid to other sources			
	against amounts due or received from them.) 87b N/A		er land	
88	At any time during the year, did the organization own a 50% or greater interest in a taxable corporation or partnership,			
	or an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3?			
	If "Yes," complete Part IX	88_	<u> </u>	<u> X</u>
89 a	501(c)(3) organizations. Enter: Amount of tax imposed on the organization during the year under:			
	section 4911 ► N/A ; section 4912 ► N/A ; section 4955 ► N/A	•	,	
þ	501(c)(3) and 501(c)(4) organizations. Did the organization engage in any section 4958 excess benefit			
	transaction during the year or did it become aware of an excess benefit transaction from a prior year?	OUF		
_	If "Yes," attach a statement explaining each transaction N/A	89b	L	
C	Enter: Amount of tax imposed on the organization managers or disqualified persons during the year under		N/A	
	sections 4912, 4955, and 4958 Enter: Amount of tax on line 89c, above, reimbursed by the organization		N/A	
b e no	List the states with which a copy of this return is filed NONE		-1/1	
90 a	Number of employees employed in the pay period that includes March 12, 2004 Au Care 90b			0
91	The transfer of the population of the transfer	42-	623	
<i>3</i> 1	The books are in care of JULIE ROBERTS Telephone no. (321)2	<u> </u>	<u> </u>	-
	Located at ► ONE COUNTRY CLUB DRIVE, MELBOURNE, FL ZIP+4 ► 3	294	0	
	LI TTP J	<u></u>		
92	Section 4947(a)(1) nonexempt charitable trusts filing Form 990 in lieu of Form 1041- Check here		▶	\Box
V-2	and enter the amount of tax-exempt interest received or accrued during the tax year 92	N/	Α	
42304	7 52			2004)

Program service revenue:	Note: +n	Access to the second se		Linrelat	ed business income	I Exclud	ed by section 512, 513, or 514	
Business Amount Section Amount function income function func		•	rwise					
SEE STATEMENT 9 84,767. 856,627. 1 Medicare-Medical payments 9 Fees and contracts from government appencies 9 Membrathly dues and assessments 9 Not rental income or (loss) from real estate: 4 decil-financel properly 9 The rental income or (loss) from real estate: 4 decil-financel properly 9 Other investment income 9 Other investment income 10 Sain or (loss) from asses of assess other than inventory 10 Membrathly dues and assesses other than inventory 10 Net income or (loss) from special events 100 Sain or (loss) from asses of assess other than inventory 10 Net income or (loss) from special events 100 Sorber renears 101 Net income or (loss) from special events 102 Gross profit or (loss) from special events 103 Other renears 105 Total (add the 194, columns (B), (D), and (E)) 105 Total (add the 194, columns (B), (D), and (E)) 106 Subtotal (add columns (B), (D), and (E)) 107 Total (add the 194, columns (B), (D), and (E)) 108 Total (add the 194, columns (B), (D), and (E)) 109 Total (add the 194, columns (B), (D), and (E)) 109 Total (add the 194, columns (B), (D), and (E)) 100 Total (add the 194, columns (B), (D), and (E)) 101 Total (add the 194, columns (B), (D), and (E)) 102 Total (add the 194, columns (B), (D), and (E)) 103 Total (add the 194, columns (B), (D), and (E)) 104 Subtotal (add columns (B), (D), and (E)) 105 Total (add the 194, columns (B), (D), and (E)) 105 Total (add the 194, columns (B), (D), and (E)) 106 Total (add the 194, columns (B), (D), and (E)) 107 Total (add the 194, columns (B), (D), and (E)) 108 Total (add the 194, columns (B), (D), and (E)) 109 Total (add the 194, columns (B), (D), and (E)) 109 Total (add the 194, columns (B), (D), and (E)) 109 Total (add the 194, columns (B), (D), and (E)) 109 Total (add the 194, columns (B), (D), and (E)) 109 Total (add the 194, columns (B), (D), and (E)) 109 Total (add the 194, columns (B), (D), and (E)) 109 Total (B) Total (B) Total (B) Total (B) Tot				Business	` '	Exclu-		•
Medicare/Medicaid payments 9 Fees and contracts from government agencies 9 Membershy does and assessments 55 Interest on savings and temporary cash investments 90 0 0 0 1 25 . 90 0 0 1 25 . 90 0 0 0 1 25 .			, ,	code	04 767	code		<u> </u>
Nedicare/Medical psyments Fees and contracts from government agencies 94 Membership dues and assessments 90 0 0 0 1	a	SEE STATEMENT	· 9		84,/6/.			856,627.
I Medicare Medicated payments 9 Fees and contracts from government agencies 9 Fees and contracts from government agencies 9 Membership glues and assessments 9 Membership glues and assessments 9 Membership glues and assessments 9 Nater statil across or gross in membership 9 Nater statil across or gross in from personal property 9 Net restal income or (loss) from personal property 90 Other investment income 100 Gain or (loss) from select elevents 101 Net income or (loss) from special events 102 Cross profitor in (loss) from special events 103 Other revenue: 9 MEMBER FINANCING 104 Subtobal (add columns (8), (D), and (E)) 105 Total (edd line 104, columns (8), (D), and (E)) 106 Total (edd line 104, columns (8), (D), and (E)) 107 Total (edd line 104, columns (8), (D), and (E)) 108 Total (edd line 104, columns (8), (D), and (E)) 109 Total (edd line 104, columns (8), (D), and (E)) 109 Total (edd line 104, columns (8), (D), and (E)) 100 Total (edd line 104, columns (8), (D), and (E)) 101 Total (edd line 104, columns (8), (D), and (E)) 102 Total (edd line 104, columns (8), (D), and (E)) 105 Total (edd line 104, columns (8), (D), and (E)) 106 Total (edd line 104, columns (8), (D), and (E)) 107 Total (edd line 104, columns (8), (D), and (E)) 108 Total (edd line 104, columns (8), (D), and (E)) 109 Total (edd line 104, columns (8), (D), and (E)) 109 Total (edd line 104, columns (8), (D), and (E)) 100 Total (edd line 104, columns (8), (D), and (E)) 101 Total (edd line 104, columns (8), (D), and (E)) 102 Total (edd line 104, columns (8), (D), and (E)) 103 Total (edd line 104, columns (8), (D), and (E)) 104 Total (edd line 104, columns (8), (D), and (E)) 105 Total (edd line 104, columns (8), (D), and (E)) 106 Total (edd line 104, columns (8), (D), and (E)) 107 Total (edd line 104, columns (8), (D), and (E)) 108 Total (edd line 104, columns (8), (D), and (E)) 109 Total (edd line 104, columns (8), (D), and (E)) 109 Total (edd line 104, columns (8), (D), and (E)) 100 Total (edd line 104,	Ь —							
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Name, address, and EIN of corporation, partnership, or disregarded entity NAME NAM	Note: Line Part V Line No.	e 105 plus line 1d, Part I, should III Relationship of Acti Explain how each activity for whexempt purposes (other than by	d equal the amount ivities to the anich income is report providing funds for	nt on line 12 Accompli ted in column	2, Part I. ishment of Exemp (E) of Part VII contributed	t Pur	poses (See page 34 of the	e instructions.)
Name, address, and EIN of corporation, partnership, or disregarded entity NAME NAM	Note: Line Part V Line No.	e 105 plus line 1d, Part I, should III Relationship of Acti Explain how each activity for whexempt purposes (other than by	d equal the amount ivities to the anich income is report providing funds for	nt on line 12 Accompli ted in column	2, Part I. ishment of Exemp (E) of Part VII contributed	t Pur	poses (See page 34 of the	e instructions.)
Name, address, and EIN of corporation, partnership, or disregarded entity NAME NAM	Note: Line Part V Line No.	e 105 plus line 1d, Part I, should III Relationship of Acti Explain how each activity for whexempt purposes (other than by	d equal the amount ivities to the anich income is report providing funds for	nt on line 12 Accompli ted in column	2, Part I. ishment of Exemp (E) of Part VII contributed	t Pur	poses (See page 34 of the	e instructions.)
Name, address, and EIN of corporation, partnership, or disregarded entity NAME NAM	Note: Line Part V Line No.	e 105 plus line 1d, Part I, should III Relationship of Acti Explain how each activity for whexempt purposes (other than by	d equal the amount ivities to the anich income is report providing funds for	nt on line 12 Accompli ted in column	2, Part I. ishment of Exemp (E) of Part VII contributed	t Pur	poses (See page 34 of the	e instructions.)
Name, address, and EIN of corporation, partnership, or disregarded entity where sets whe	Part Vi	e 105 plus line 1d, Part I, should Relationship of Acti Explain how each activity for whexempt purposes (other than by SEE STATEMENT	ivities to the amou ivities to the a nich income is report y providing funds for	nt on line 12 Accompli ted in column r such purpos	2, Part I. ishment of Exemp i (E) of Part VII contributed ses).	importa	poses (See page 34 of the antly to the accomplishment	e instructions.) of the organization's
partnership, or disregarded entity ownership interest N/A % N/A % Solution Part X Information Regarding Transfers Associated v (a) Did the organization, during the year, receive any funds, directly or indirectly, t (b) Did the organization, during the year, pay premiums, directly or indirectly, on a Note: If "Yes" to (b), file Form 8870 and Form 4720 (see instructions). Please Sign Here Preparer's Signature of fice Preparer's Signature of fice Sign	Part Vi	e 105 plus line 1d, Part I, should Relationship of Acti Explain how each activity for whexempt purposes (other than by SEE STATEMENT	ivities to the anou- ivities to the anich income is report y providing funds for 10	nt on line 12 Accompli ted in column r such purpos	2, Part I. ishment of Exemp i (E) of Part VII contributed ses).	importa	poses (See page 34 of the antly to the accomplishment	e instructions.) of the organization's
N/A % Reart X Information Regarding Transfers Associated v (a) Did the organization, during the year, receive any funds, directly or indirectly, to (b) Did the organization, during the year, pay premiums, directly or indirectly, on a Note: If "Yes" to (b), file Form 87.20 (see instructions). Please Sign Here Paid Preparer's Signature of fice Preparer's Signature of fice Signature	Part IX	E 105 plus line 1d, Part I, should Relationship of Actionship of Actions	ivities to the anoutivities to the anoutivities to the anich income is report y providing funds for 10	nt on line 12 Accompli ted in column r such purpos	e, Part I. ishment of Exemp (E) of Part VII contributed ses). ies and Disregard (C)	importa	poses (See page 34 of the antly to the accomplishment	e instructions.) of the organization's instructions.)
Signature Sign	Part V Line No.	E 105 plus line 1d, Part I, should Relationship of Actionship of Actions	ivities to the amount	nt on line 12 Accomplited in column r such purpos	e, Part I. ishment of Exemp (E) of Part VII contributed ses). ies and Disregard (C)	importa	poses (See page 34 of the antly to the accomplishment	instructions.) instructions.) (E) End-of-year
Information Regarding Transfers Associated v (a) Did the organization, during the year, receive any funds, directly or indirectly, to (b) Did the organization, during the year, pay premiums, directly or indirectly, on a Note: If "Yes" to (b), file Form 8870 and Form 4720 (see instructions). Please Sign Here Preparer's Signature for fice Preparer's Signature for fice Firit's name for yours II Solf-employed), 1555 PALM BEACH LAKES BI	Part V Line No.	E 105 plus line 1d, Part I, should Relationship of Actionship of Actions	ivities to the anou- ivities to the anou- ivities to the anich income is report y providing funds for 10 ing Taxable S (B) Percentage of ownership interest	nt on line 12 Accomplited in column r such purpos	e, Part I. ishment of Exemp (E) of Part VII contributed ses). ies and Disregard (C)	importa	poses (See page 34 of the antly to the accomplishment	instructions.) instructions.) (E) End-of-year
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(a) Did the organization, during the year, receive any funds, directly or indirectly, t (b) Did the organization, during the year, pay premiums, directly or indirectly, on a Note: If "Yes" to (b), file Form 82/0 and Form 4720 (see instructions). Under penalties pophy, packare that I have examined this return, including accomposite, and compared penalties of preparer (other than officer) is based on all inform Signature of office Preparer's signature Fire s name for John MCGLADREY, INC. Substitute of the year, receive any funds, directly or indirectly, to a constitutions, the constitutions of the year, pay premiums, directly or indirectly, to a constitutions. Under penalties of pophy, packare that I have examined this return, including accomposition of preparer (other than officer) is based on all inform The penalties of the year, pay premiums, directly or indirectly, to a constitutions. Under penalties of the year, pay premiums, directly or indirectly, to a constitution of the year, pay premiums, directly or indirectly, to a constitution of the year, pay premiums, directly or indirectly, to a constitution of the year, pay premiums, directly or indirectly, to a constitution of the year, pay premiums, directly or indirectly, to a constitution of the year, pay premiums, directly or indirectly, to a constitution of the year, pay premiums, directly or indirectly, on a constitution of the year, pay premiums, directly or indirectly, on a constitution of the year, pay premiums, directly or indirectly, on a constitution of the year, pay premiums, directly or indirectly, on a constitution of the year, pay premiums, directly or indirectly, on a constitution of the year, pay premiums, directly or indirectly or indirectly.	Part V Line No.	E 105 plus line 1d, Part I, should Relationship of Actionship of Actions	ivities to the amount	nt on line 12 Accompli ted in column r such purpos Subsidiar	e, Part I. ishment of Exemp (E) of Part VII contributed ses). ies and Disregard (C)	importa	poses (See page 34 of the antly to the accomplishment	instructions.) instructions.) (E) End-of-year
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	Part X Name, a partr (a) Did Note: If Please Sign Here Paid Preparer's	Explain how each activity for whe exempt purposes (other than by SEE STATEMENT Information Regard (A) address, and EIN of corporation, nership, or disregarded entity N/A Information Regard the organization, during the year, processing to the organization, during the year, processing to the organization, during the year, processing to the organization of processing to the organization of the organization organizat	ivities to the amoutivities to the anich income is report y providing funds for 10 Ing Taxable S Percentage of ownership interest 99 ying Transfers eceive any funds, di pay premiums, direct at Parameters of the at Thave examined this payparer (other than officient of the at	nt on line 12 Accomplited in column r such purpos Subsidiar Associar irectly or indirect instructions) return, including rety is based on	es and Disregard (C) Nature of activities ted v ectly, t ly, on a lal intern	importa	poses (See page 34 of the antly to the accomplishment	instructions.) instructions.) (E) End-of-year
	Part X Name, a partr (a) Did (b) Did Note: If Please Sign Here Paid Preparer's Use Only	E 105 plus line 1d, Part I, should Relationship of Acti Explain how each activity for whe exempt purposes (other than by SEE STATEMENT Information Regard (A) Address, and EIN of corporation, nership, or disregarded entity N/A Information Regard the organization, during the year, rethe organization, during the year, provided the organization of providing the year, provided the organization of provided the organization of providing the year, provided the organization of providing the year, provided the organization of provided the organization of providing the year.	ivities to the amoutivities to the anich income is report by providing funds for 10 Ing Taxable S Percentage of ownership interest ownership interest ownership interest eceive any funds, die on the property of the proper	nt on line 12 Accomplited in column r such purpos Subsidiar Subsidiar Associar irectly or indirect instructions return, including retry is based on Inc.	e. Part I. ishment of Exemp (E) of Part VII contributed ses). ies and Disregard (C) Nature of activities ted v ectly, to lay, on a laccoop all 1772 Date	importa	poses (See page 34 of the antly to the accomplishment	instructions.) instructions.) (E) End-of-year

Form '8868

(Rev. December 2004)

Department of the Treasury Internal Revenue Service

Application for Extension of Time To File an Exempt Organization Return

File a separate application for each return.

OMB No. 1545-1709

	are filing for an Automatic 3-Month Extension, complete only Part I and check this box	
-	are filing for an Additional (not automatic) 3-Month Extension, complete only Part II (on page 2 of this	
Do not o	complete Part II unless you have already been granted an automatic 3 month extension on a previously fi	lled Form 8868.
Part I	Automatic 3-Month Extension of Time - Only submit original (no copies needed)	
Form 99	10-T corporations requesting an automatic 6-month extension - check this box and complete Part I only	▶ □
	corporations (including Form 990-C filers) must use Form 7004 to request an extension of time to file incorpartnerships, REMICs, and trusts must use Form 8736 to request an extension of time to file Form 1065, 10	
below (6 extensio	nic Filing (e-file). Form 8868 can be filed electronically if you want a 3-month automatic extension of time of months for corporate Form 990-T filers). However, you cannot file it electronically if you want the additionan, instead you must submit the fully completed signed page 2 (Part II) of Form 8868. For more details on the w.irs.gov/efile.	al (not automatic) 3-month
Type or	Name of Exempt Organization	Employer identification number
print	SUNTREE COUNTRY CLUB, INC.	59-3036758
File by the due date for filing your	Number street and year provite no If a D.O. have an instructions	
return. See instructions		
Check ty	ype of return to be filed(file a separate application for each return):	
Fo Fo	rm 990	227 069
Telepi	hone No. ► (321)242-6230 FAX No. ► organization does not have an office or place of business in the United States, check this box is for a Group Return , enter the organization's four digit Group Exemption Number (GEN) . If this is for part of the group, check this box ► and attach a list with the names and EINs of all	is is for the whole group, check this
to	equest an automatic 3-month (6-months for a Form 990-T corporation) extension of time until AUGU file the exempt organization return for the organization named above. The extension is for the organization Colored and the extension of time until AUGU August 2004 The extension of time until AUGU August 2004 The extension of time until AUGU August 2004 The extension of time until AUGU August 2004 The extension of time until AUGU August 2004 The extension of time until AUGU August 2004 The extension of time until AUGust 2004 The extension of time until	· · · · · · · · · · · · · · · · · · ·
2 If ti	his tax year is for less than 12 months, check reason: Initial return Final return	Change in accounting period
	his application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nrefundable credits. See instructions	<u>\$</u>
	his application is for Form 990-PF or 990-T, enter any refundable credits and estimated payments made. Include any prior year overpayment allowed as a credit	<u>\$</u>
	lance Due. Subtract line 3b from line 3a. Include your payment with this form, or, if required, deposit with upon or, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions	-
Caution.	If you are going to make an electronic fund withdrawal with this Form 8868, see Form 8453-EO and Form	8879-EO for payment instructions.
LHA F	or Privacy Act and Paperwork Reduction Act Notice, see instructions.	Form 8868 (Rev. 12-2004)

FORM 990 G.	AIN	(LOSS	FRON	M SALE	OF O	THER	ASSET	S	ST	ATEME	NT 1
DESCRIPTION					DA ACQU	TE IREC		ATE OLD	METI ACQU		
GAIN ON DISPOSAL OF :	PROI	PERTY							PURCI	HASED	-
NAME OF BUYER	S	GROS			r or Basi		XPENSE F SALE		DEPREC		GAIN (LOSS)
	_	2	,500.		0	•	0	•	0.		2,500.
DESCRIPTION	-				DA ACQU	TE IRED		ATE OLD	METI ACQU		
GAIN ON HURRICANED D	AMA(GES					·	•	PURCI	IASED	•
NAME OF BUYER	Ş	GROS		COS'	r or Basi		XPENSE F SALE		DEPREC		GAIN (LOSS)
	-	78	,919.	58	8,558	•	0	•.	0.	2	0,361.
TO FM 990, PART I, LI	- 8 N	81	,419.	58	8,558	. –	0		0.	2	2,861.

FORM 990	INCOME AND COST OF GOODS SOLD INCLUDED ON PART I, LINE 10	STATEMENT 2
INCOME		
1. GROSS RECEIPTS	- · · · · · · · · · · · · · · · · · · ·	
2. RETURNS AND ALLOWANCE 3. LINE 1 LESS LINE 2.		1,835,920
4. COST OF GOODS SOLD (35. GROSS PROFIT (LINE 3		1,033,186
COST OF GOODS SOLD		
6. INVENTORY AT BEGINNII 7. MERCHANDISE PURCHASEI 8. COST OF LABOR		
9. MATERIALS AND SUPPLIE		
10. OTHER COSTS 11. ADD LINES 6 THROUGH	0	929,653
12. INVENTORY AT END OF 13. COST OF GOODS SOLD (802,734

FORM 990 OTHER	CHANGES IN NET A	ASSETS OR FUN	D BALANCES	STATEMENT	3
DESCRIPTION				AMOUNT	
MEMBERSHIP CERTIFICATE	S ISSUED			141,5	12.
MEMBERSHIP CERTIFICATE				<248,4	
PROCEEDS UNDER EQUITY	PAYMENT PLAN			61,5	51.
TOTAL TO FORM 990, PAR	T I, LINE 20			<45,3	95.> ——
FORM 990	ОТНЕ	R EXPENSES		STATEMENT	4
	(A)	(B)	(C)	(D)	
DESCRIPTION	TOTAL	PROGRAM SERVICES	MANAGEMENT AND GENERAL	FUNDRAISI	NG
GOLF COURSE					_
MAINTENANCE	1,499,140.				
ADMINISTRATIVE FOOD AND BEVERAGE	542,271.				
GOLF OPERATIONS	213,424. 148,735.				
TENNIS	27,270.				
ENTERTAINMENT	70,580.				
PROPERTY TAXES	122,978.				
INSURANCE	135,722.	·			
TOTAL TO FM 990, LN 43	2,760,120.				
					

EXPLANATION

SUNTREE COUNTRY CLUB IS A SOCIAL CLUB WHOSE EXEMPT PURPOSE IS TO PROMOTE SOCIAL INTERACTION OF CLUB MEMBERS BY PROVIDING DINNING AND RECREATIONAL ACTIVITIES.

FORM 990		OTHER ASSETS			STATEMENT	6
DESCRIPTION					AMOUNT	
OTHER ASSETS BOARD DESIGNATED CAPITAL FO	UNDS				17,45 50,00	
TOTAL TO FORM 990, PART IV	, LINE	58, COLUMN B			67,45	50.
FORM 990 OTHER EX	KPENSES	NOT INCLUDED	ON FOR	м 990	STATEMENT	7
DESCRIPTION					TRUOMA	
COST OF SALES					802,73	34.
TOTAL TO FORM 990, PART IV-	-B				802,73	34.
FORM 990 OTHER I	REVENUE	INCLUDED ON F	ORM 990)	STATEMENT	8
DESCRIPTION					AMOUNT	
COST OF SALES					<802,73	34.:
TOTAL TO FORM 990, PART IV-	-A				<802,73	34.
FORM 990	PROGR	AM SERVICE REV	ENUE		STATEMENT	9
DESCRIPTION	BUS CODE	UNRELATED BUSINESS INC	EXCL CODE	EXCLUDED AMOUNT	RELATED OF EXEMPT FUN TION INCOM	1C-
GREENS FEES GOLF CART RENTAL TRAIL FEES RANGE FEES	713910	84,767.			76,80 273,16 358,89 78,85 6,60	58. 93. 52.
TENNIS COURT FEES ACTIVITY FEES					62,30	13.

FORM 9	90 PART VIII - RELATIONSHIP OF ACTIVITIES TO ACCOMPLISHMENT OF EXEMPT PURPOSES	STATEMENT	10
LINE	EXPLANATION OF RELATIONSHIP OF ACTIVITIES		
93	COLUMN (E) OF PART VII REPRESENTS INCOME COLLECTED BY THE	-	
94 95	CLUB RELATED TO THE FOLLOWING ACTIVITIES: (1) MAINTAINING GOLF COURSE AND RELATED FACILITIES, AND (2) MAINTAINING A	A	
100	CLUBHOUSE WHICH IS USED PRIMARILY FOR DINING AND OTHER		
102	SOCIAL ACTIVITIES. GOLFING AND SOCIALIZING AT THE CLUBHOUS	SE	
103	ARE THE MEANS BY WHICH THE CLUB ACCOMPLISHES ITS TAX EXEM	PΤ	

PURPOSE WHICH IS TO BIND ITS MEMBERS TOGETHER BY A COMMON

OBJECTIVE DIRECTED AT PLEASURE AND RECREATION.

PBC

Fixed Asset Reconciliations for the year ended Dec. 31, 2004

	Beg	Adds	Disposals	End	
1510 Furniture	171,902.14	11,961.34		183,863.48	
1520 Equipment	399,513.55	24,929.75	2,441.18	422,002.12	
1530 GC Equipment	1,071,314.97	93,710.29	50,539.74	1,114,485.52	
1540 Vehicles	15,636.66			15,636.66	
1550 Buildings	2,808,987.24	113,297.01	2,640.00	2,919,644.25	
1560 GC Improvements	4,702,955.72	-		4,702,955.72	
1570 Golf Course	2,570,000.00	-		2,570,000.00	
	11,740,310.28	243,898.39	55,620.92	11,928,587.75	
impact fees		(7,650.00)			
		236,248.39		-	•
Accum. Depreciation					
	Beg	Adds	Disposals	End	Adjusted
1610 Furniture	82,375.28	27,463.96		109,839.24	109,839.24
1620 Equipment	207,932.53	47,250.56	610.20	254,572.89	254,572.89
1630 GC Equipment	721,249.69	101,372.21	50,539.74	772,082.16	772,082.16
1640 Vehicles	14,854.77	781.89	-	15,636.66	15,636.66
1650 Buildings	1,094,605.75	146,233.90		1,240,839.65	1,240,839.65
1660 GC Improvements	2,927,839.07	287,856.13		3,215,695.20	3,215,695.20
1670 Golf Course	· ,	•		· ·	
	5,048,857.09	610,958.65	51,149.94	5,608,665.80	5,608,665.80

Suntree Country Club Board of Directors For Year Ending 12/31/04

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