

Information submitted via Top Hat Plan Statement Online Filing System to U. S.
Department of Labor under 29 CFR 2520.104-23

Date Completed: 3/24/2026 11:08 AM EST

Confirmation Number: 16253

Amended Confirmation Number:

Employer Information

Name: Castle Pines Golf Club, Inc.
Address: 1000 Hummingbird Drive
City: Castle Rock
State: CO
Zip Code: 80108

Plan Administrator Information

Name: Michael MacAdams
Address: 1000 Hummingbird Drive
City: Castle Rock
State: CO
Zip Code: 80108
Phone: 3036886000
Email: mmacadams@castlepinesgolfclub.club

Plan Information

Employer maintains the plan or plans below primarily for the purpose of providing deferred compensation for a select group of management or highly compensated employees.

ID:1	Plan Name:	Castle Pines Golf Club, Inc. Nonqualified	Number of
		Deferred Compensation Plan for Scott Pavalko Employees:	1

Additional Information:



U. S. Department of Labor
Employee Benefits Security Administration
Washington, DC 20210

This message confirms that the Department of Labor's (DOL's) Employee Benefits Security Administration (EBSA) has received the filing of your Top Hat Plan Statement. The confirmation code for your filing is 16253. When correcting errors to your filing, please use this code in your amended statement. This communication does not mean that DOL has made a determination that you are eligible to file under DOL regulation 29 CFR 2520.104-23.