


2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 29, 2008 8:00 am
Secretary of State

01-29-2008 90005 050 ****61.25

DOCUMENT # 718013
 1. Entity Name
POINTE TOWERS CONDOMINIUM, INC.



Principal Place of Business
 % MRS. LORETTA PREDMORE
 555 GULF WAY #6-S
 PASS-A-GRILLE, FL 33706

Mailing Address
 250 104TH AVENUE
 TREASURE ISLAND, FL 33706

40011340



2. Principal Place of Business - No P.O. Box #
 Suite, Apt. #, etc.
 City & State
 Zip Country

3. Mailing Address
 Suite, Apt. #, etc.
 City & State
 Zip Country

01032008 Chg-NP CR2E037 (12/06)

4. FEI Number
 59-1834597

Applied For
 Not Applicable

5. Certificate of Status Desired **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent
~~MIDYETTE WILLIAM M III~~
~~225 EAST LEMON ST STE 300~~
~~LAKELAND, FL 33801~~

7. Name and Address of New Registered Agent
 Name Mrs. Loretta Predmore
 Street Address (P.O. Box Number is Not Acceptable)
555 Gulf Way #6-S
 City Pass-A-Grille FL Zip Code 33706

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE Loretta B. Predmore (NOTE: Registered Agent signature required when reinstating)

DATE Jan 21st, 2008

Filing Fee is \$61.25 Due by May 1, 2008

9. Election Campaign Financing Trust Fund Contribution. **\$5.00 May Be Added to Fees**

Make check payable to Florida Department of State

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD PREDMORE, JOHN W 555 GULF WAY #2 SOUTH PASS-A-GRILLE, FL 33706	<input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DS SCHEFSTAD, THERESA 2116 FEATHERSOUND DR CLEARWATER, FL 33762	<input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DT JAMISON, JOYCE 555 GULF WAY #3 SOUTH SAINT PETERSBURG, FL 33706	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D LIPPONEN, CHERYL 857 5TH AVE 11TH FLOOR NEW YORK, NY 10021	<input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD LORETTA B. PREDMORE JOHN PREDMORE BOARD MEMBER 555 GULF WAY #2 SOUTH PASS-A-GRILLE, FL 33706	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP BARRY GOMBERG 1162 PLYMOUTH CT. #15W CHICAGO, ILL. 60605	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	BOARD MEMBER	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DT FRANK DOCKETT 555 GULF WAY PASS-A-GRILLE, FL 33706	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D MARY LOU BROWN 555 GULF WAY PASS-A-GRILLE, FL 33706	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DS SUSAN OBER 469 JAILAY ROAD WATCHUNG, NJ 07069	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Loretta B. Predmore 1/21/08 727-403-8480

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #