2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 752077

FILED Mar 23, 2010 Secretary of State

Entity Name: SOUTH POINTE SOUTH HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business: New Principal Place of Business:

2180 W. ST RD. 434 2180 W. SR 434 SUITE 5000 SUITE 5000

LONGWOOD, FL 327795044 US LONGWOOD, FL 327795044 US

Current Mailing Address: New Mailing Address:

2180 W. ST RD. 434 2180 W. SR 434 SUITE 5000 SUITE 5000

LONGWOOD, FL 327795044 US LONGWOOD, FL 327795044 US

FEI Number: 59-2072279 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

HART, JAMES W JR SENTRY MANAGEMENT INC 2180 W SR 434 STE 5000 LONGWOOD, FL 327795044 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

OFFICERS AND DIRECTORS:

Title: PD

Name: HEFFNER, RALPH
Address: 9701 FOXGLOVE CIRCLE
City-St-Zip: FORT MYERS, FL 33919

Title: SD

Name: STIGLER, SALLY

Address: 9868 OWLCLOVER STREET City-St-Zip: FORT MYERS, FL 33919

Title: TD

Name: DONOVAN, VINCE
Address: 9741 FOXGLOVE CIR
City-St-Zip: FORT MYERS, FL 33919

Title: VPD

Name: MAHON, LINDA Address: 9865 OWLCLOVER ST City-St-Zip: FORT MYERS, FL 33919

Title: D

Name: RUSSELL, BETSY
Address: 9850 WILDGINGER DR
City-St-Zip: FORT MYERS, FL 33919

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: RALPH HEFFNER PD 03/23/2010