2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 759770

FILED Jan 19, 2010 Secretary of State

Entity Name: CARLOS POINTE BEACH CLUB ASSOCIATION, INC.

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

6719 WINKLER RD

#200

FORT MYERS, FL 33919 US

Current Mailing Address: New Mailing Address:

6719 WINKLER RD

#200

FORT MYERS, FL 33919 US

FEI Number: 59-2127344 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:

ALLIANT PROPERTY MANAGEMENT 6719 WINKLER RD SUITE 200 FORT MYERS, FL 33919 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: ABEND, TOBY Address: 144 UPLAND AVE

City-St-Zip: NEWTON HIGHLAND, MA 02161

Title: VP

Name: GALVANONI, ROBERT Address: 719 S. KENNICOTT

City-St-Zip: ARLINGTON HEIGHTS, IL 60005

Title: SD

Name: CHIARCOS, IRMA
Address: 4535 CONCESSION 8, RR3
City-St-Zip: MAIDSTONE, ON NOR 1KO

Title: [

Name: BOSTWICK, JAMES
Address: 1520 OLD LANTERN TRAIL
City-St-Zip: FT. WAYNE, IN 46845

Title: TD

Name: COWAN, JIM

Address: 8350 ESTERO BLVD., #311 City-St-Zip: FORT MYERS BEACH, FL 33931

Title: [

 Name:
 CLIFTON, MIKE

 Address:
 2880 NE 14TH ST. #905

 City-St-Zip:
 POMPANO BEACH, FL 33062

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: JIM COWAN TD 01/19/2010