

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01000008721

FILED  
Apr 13, 2009  
Secretary of State

Entity Name: REGENCY POINTE ASSOCIATION, INC.

**Current Principal Place of Business:**

C/O EPM SERVICES  
390 WEST STATE RD. 434 SUITE 203  
LONGWOOD, FL 327504977 US

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 197043  
WINTER SPRINGS, FL 327197043

**New Mailing Address:**

FEI Number: 02-0574055

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

PALMERSTON LLC  
390 WEST S.R. 434 STE.203  
LONGWOOD, FL 327504977 US

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

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: DP ( ) Delete  
Name: WOOD, DELMAS  
Address: 115 INTERNATIONAL PKWY  
City-St-Zip: HEATHROW, FL 32746

Title: DVP ( ) Delete  
Name: SODERSTROM, ROGER W  
Address: 115 INTERNATIONAL PKWY  
City-St-Zip: HEATHROW, FL 32746

Title: D ( ) Delete  
Name: IRVIN, SAM  
Address: 142 PARLIAMENT LOOP SUITE 1012  
City-St-Zip: LAKE MARY, FL 32746

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: DP (X) Change ( ) Addition  
Name: HORBAL, MIKE  
Address: 141 PARLIAMENT LOOP  
City-St-Zip: LAKE MARY, FL 32746

Title: S/T (X) Change ( ) Addition  
Name: FOURMAN, CARY  
Address: 1434 RIVER OF MAY STREET  
City-St-Zip: ST. AUGUSTINE, FL 32092

Title: DVP (X) Change ( ) Addition  
Name: IRVIN, SAM  
Address: 142 PARLIAMENT LOOP SUITE 1012  
City-St-Zip: LAKE MARY, FL 32746

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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 an address, with all other like empowered.

SIGNATURE: CHELSEA BONO, EPM SERVICES

MGMT

04/13/2009

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date