

# 2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000008840

**FILED**  
**Jan 10, 2011**  
**Secretary of State**

**Entity Name:** HIGH POINTE HOMEOWNERS ASSOCIATION OF NASSAU COUNTY, INC.

**Current Principal Place of Business:**

96249 HIGH POINTE DR.  
FERNANDINA BEACH, FL 32034

**New Principal Place of Business:**

**Current Mailing Address:**

96249 HIGH POINTE DR.  
FERNANDINA BEACH, FL 32034

**New Mailing Address:**

FEI Number: 65-1173043

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

ROBERT L. PETERS, P.A.  
28 SOUTH 10TH STREET  
FERNANDINA BEACH, FL 32034 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: P  
Name: SOBOLEWSKI, MARK  
Address: 96360 HIGH POINTE DRIVE  
City-St-Zip: FERNANDINA BEACH, FL 32034

Title: S  
Name: LATHROP, DENNIS  
Address: 96406 HIGH POINTE DR  
City-St-Zip: FERNANDINA BEACH, FL 32034

Title: VP  
Name: BELL, DON  
Address: 96081 HIGH POINTE DRIVE  
City-St-Zip: FERNANDINA BEACH, FL 32034

Title: D  
Name: ALLISON, LYNN  
Address: 96034 SANDY POINT CIR  
City-St-Zip: FERNANDINA BEACH, FL 32034

Title: T  
Name: TONTI, LOUIS  
Address: 96249 HIGH POINT DRIVE  
City-St-Zip: FERNANDINA BEACH, FL 32034

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: LOUIS G. TONTI

T

01/10/2011

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

\_\_\_\_\_  
Date