

2006 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT

FILED
Jun 26, 2006
Secretary of State

DOCUMENT# N03000000536

Entity Name: COLONIAL POINTE COMMUNITY ASSOCIATION, INC.

Current Principal Place of Business:

C/O ROSOA MANAGEMENT
2685 HORSESHOE DR SUITE 25
NAPLES, FL 34106

New Principal Place of Business:

C/O BCH MANAGEMENT GROUP, INC.
1840 BOY SCOUT DRIVE, SUITE B
FORT MYERS, FL 33907

Current Mailing Address:

C/O ROSOA MANAGEMENT
2685 HORSESHOE DR SUITE 25
NAPLES, FL 34106

New Mailing Address:

C/O BCH MANAGEMENT GROUP, INC.
1840 BOY SCOUT DRIVE, SUITE B
FORT MYERS, FL 33907

FEI Number: 81-0599763 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

CUNDIFF, ROBERT A
15002 DALMORAL LOOP
FORT MYERS, FL 33919 US

Name and Address of New Registered Agent:

SHIELDS, CHRISTOPHER J
1833 HENDRY STREET
FORT MYERS, FL 33901 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: CHRISTOPHER J. SHIELDS 06/26/2006

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: DP () Delete
Name: CUNDIFF, ROBERT
Address: 15002 BALMORAL LOOP
City-St-Zip: FORT MYERS, FL 33919

Title: DS () Delete
Name: BRANTHCOVER, WILLIAM
Address: 15024 BALMORAL LOOP
City-St-Zip: FORT MYERS, FL 33919

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: DVP () Change (X) Addition
Name: KELLY, ROBERT
Address: 15009 BALMORAL LOOP
City-St-Zip: FORT MYERS, FL 33919

Title: DT () Change (X) Addition
Name: BELESLIN, GEORGE
Address: 15007 BALMORAL LOOP
City-St-Zip: FORT MYERS, FL 33919

I hereby certify that the information supplied with this filing does not qualify for the 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: ROBERT A. CUNDIFF DP 06/26/2006

Electronic Signature of Signing Officer or Director Date