

2009 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT**FILED**
May 27, 2009
Secretary of State

DOCUMENT# N06000003955

Entity Name: ANCLOTE POINT TOWNHOMES HOMEOWNERS ASSOCIATION, INC.**Current Principal Place of Business:**2870 SCHERER DR., STE. 100
SUITE 100
ST. PETERSBURG, FL 33716**New Principal Place of Business:****Current Mailing Address:**2870 SCHERER DR., STE. 100
SUITE 100
ST. PETERSBURG, FL 33716**New Mailing Address:****FEI Number:** **FEI Number Applied For ()** **FEI Number Not Applicable (X)** **Certificate of Status Desired ()****Name and Address of Current Registered Agent:**TREADWAY FENTON
1111 AVENDIA DEL CIRCO
SUITE B
VENICE, FL 34285 US**Name and Address of New Registered Agent:**TSOMBANIDIS, JOSEPH A P.A.
1822 N. BELCHER RD.
SUITE 202
CLEARWATER, FL 33765 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: JOSEPH A. TSOMBANIDIS

05/27/2009

Electronic Signature of Registered Agent_____
Date**OFFICERS AND DIRECTORS:**Title: P () Delete
Name: BADEN, GERRY
Address: 1118 STARFISH LANE
City-St-Zip: TARPON SPRINGS, FL 34689Title: VP () Delete
Name: STEINGRABER, MATT
Address: 1152 FLYING FISH LANE
City-St-Zip: TARPON SPRINGS, FL 34689Title: T () Delete
Name: HATTEY, JOHN
Address: 127 SPRING BLVD.
City-St-Zip: TARPON SPRINGS, FL 34689Title: S () Delete
Name: FITZGERALD, RICK
Address: 1114 FLYING FISH LANE
City-St-Zip: TARPON SPRINGS, FL 34689Title: D () Delete
Name: TSOMBANIDIS, MIKE
Address: 4925 VALLEY FIELD DR.
City-St-Zip: OLDSMAR, FL 34677**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**Title: P (X) Change () Addition
Name: BADEN, GERARD
Address: 1118 STARFISH LANE
City-St-Zip: TARPON SPRINGS, FL 34689Title: () Change () Addition
Name:
Address:
City-St-Zip:Title: () Change () Addition
Name:
Address:
City-St-Zip:Title: () Change () Addition
Name:
Address:
City-St-Zip:Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: GERARD BADEN

P

05/27/2009

Electronic Signature of Signing Officer or Director_____
Date