

2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N07000004332

FILED
Mar 23, 2011
Secretary of State

Entity Name: NORTHPOINTE VILLAS HOMEOWNERS' ASSOCIATION OF OCALA, FLORIDA, INC.

Current Principal Place of Business:

2550 N.E. 36TH AVENUE,
SUITE F
OCALA, FL 34470

New Principal Place of Business:

Current Mailing Address:

2550 N.E. 36TH AVENUE,
SUITE F
OCALA, FL 34470

New Mailing Address:

FEI Number: 26-1900394

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

FINN, MICHAEL A
2550 NE 36TH AVENUE, SUITE F
OCALA, FL 34471 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
Name: FINN, MICHAEL A
Address: 2550 NE 36TH AVENUE, SUITE F
City-St-Zip: OCALA, FL 34471

Title: DVPT
Name: FINN, DIANE C
Address: 2550 NE 36TH AVENUE, SUITE F
City-St-Zip: OCALA, FL 34471

Title: DS
Name: BOWEN, MARSHA N
Address: 2550 NE 36TH AVENUE, SUITE F
City-St-Zip: OCALA, FL 34471

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: MICHAEL A. FINN

DP

03/23/2011

Electronic Signature of Signing Officer or Director

Date