

2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N16595

FILED
Mar 28, 2011
Secretary of State

Entity Name: THE VILLAGE OF SARATOGA POINTE HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:

8409 N. MILITARY TRAIL
STE #119
PALM BEACH GARDENS, FL 33410

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 32907
PALM BEACH GARDENS, FL 33420

New Mailing Address:

FEI Number: 59-2715861 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

DICKER, EDWARD
1818 AUSTRALIAN AVENUE SOUTH
SUITE 400
WEST PALM BEACH, FL 33409 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: PD
Name: ELLINS, VICTOR
Address: 2860 CUYAHOGA LANE
City-St-Zip: WEST PALM BEACH, FL 33409

Title: VD
Name: HUGHES, DONALD
Address: 2845 CUYAHOGA LANE
City-St-Zip: WEST PALM BEACH, FL 33409

Title: TD
Name: BUSCH, ROBERT
Address: 2875 FARRAGUT LN
City-St-Zip: WEST PALM BEACH, FL 33409

Title: D
Name: PETERSON, ROBERT
Address: 2515 IROQUOIS CR
City-St-Zip: WEST PALM BEACH, FL 33409

Title: SD
Name: HILL, SHARON
Address: 2885 CUYAHOGA LANE
City-St-Zip: WEST PALM BEACH, FL 33409

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: VICTOR ELLINS

PD

03/28/2011

Electronic Signature of Signing Officer or Director

_____ Date