

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N26439

FILED
Feb 27, 2009
Secretary of State

Entity Name: VILLA POINTE HOMEOWNERS' ASSOCIATION, INC.

Current Principal Place of Business:

DAVENPORT PROFESSIONAL PROP MGMT INC.
6620 LAKE WORTH ROAD, STE F
LAKE WORTH, FL 33467 US

New Principal Place of Business:

INFINITY COMMUNITY MANAGEMENT, INC.
3107 POOLSIDE DRIVE
GREENACRES, FL 33463 US

Current Mailing Address:

6620 LAKE WORTH ROAD
STE F
LAKE WORTH, FL 33467 US

New Mailing Address:

P.O. BOX 16154
WEST PALM BEACH, FL 33416 US

FEI Number: 65-0120256

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

DICKER, KRIVOK & STOLOFF PA
1818 AUSTRALIAN AVE SOUTH
#400
WEST PALM BEACH, FL 33401 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: S () Delete
Name: PATTERSON, BRENDA
Address: 6620 LAKE WORTH RD. STE F
City-St-Zip: LAKE WORTH, FL 33467

Title: T () Delete
Name: ELSBERRY, JAMES
Address: 6620 LAKE WORTH RD STE F
City-St-Zip: LAKE WORTH, FL 33467

Title: PD () Delete
Name: OLES, CATHY ANN
Address: 6620 LAKE WORTH RD STE F
City-St-Zip: LAKE WORTH, FL 33467

Title: D () Delete
Name: SWEENEY, DAN
Address: 6620 LAKE WORTH RD. STE F
City-St-Zip: LAKE WORTH, FL 33467

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: S (X) Change () Addition
Name: PATTERSON, BRENDA
Address: 1925 MONKS COURT
City-St-Zip: WEST PALM BEACH, FL 33415

Title: T (X) Change () Addition
Name: ELSBERRY, JAMES
Address: 1985 MONKS COURT
City-St-Zip: WEST PALM BEACH, FL 33415

Title: PD (X) Change () Addition
Name: OLES, CATHY
Address: 1951 MONKS COURT
City-St-Zip: WEST PALM BEACH, FL 33415

Title: VP (X) Change () Addition
Name: CORIA, OSCAR
Address: 1991 MONKS COURT
City-St-Zip: WEST PALM BEACH, FL 33415

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: CATHY OLES

PRES

02/27/2009

Electronic Signature of Signing Officer or Director

Date