

2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N99000000298

FILED
Feb 28, 2012
Secretary of State

Entity Name: COMPASS POINTE COMMUNITY ASSOCIATION, INC.

Current Principal Place of Business:

707 ROCHESTER DRIVE
W. MELBOURNE, FL 32904 US

New Principal Place of Business:

707 ROCHESTER DR.
W. MELBOURNE, FL 32904 US

Current Mailing Address:

707 ROCHESTER DRIVE
W. MELBOURNE, FL 32904 US

New Mailing Address:

FEI Number: 59-3558549 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DELORME, DONALD B DS
707 ROCHESTER DRIVE
W. MELBOURNE, FL 32904 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: D/P
Name: SOTTILE, SAL D/P
Address: 707 ROCHESTER DRIVE
City-St-Zip: W. MELBOURNE, FL 32904 US

Title: D/V
Name: GAIR, ALLEN D/V
Address: 707 ROCHESTER DRIVE
City-St-Zip: W. MELBOURNE, FL 32904

Title: DS
Name: DELORME, DONALD B DS
Address: 707 ROCHESTER DRIVE
City-St-Zip: W. MELBOURNE, FL 32904

Title: D/T
Name: NADE, JEFF D/T
Address: 707 ROCHESTER DRIVE
City-St-Zip: W.MELBOURNE, FL 32904

Title: D
Name: CHAPMAN, SHEILA D
Address: 707 ROCHESTER DRIVE
City-St-Zip: W.MELBOURNE, FL 32904

Title: D
Name: WILDERMUTH, RON D
Address: 707 ROCHESTER DRIVE
City-St-Zip: W. MELBOURNE, FL 32904

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: DONALD B. DELORME

D/S

02/28/2012

Electronic Signature of Signing Officer or Director

Date