

2008 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT**FILED**
Dec 11, 2008
Secretary of State

DOCUMENT# N06000002341

Entity Name: CARRIAGE POINTE NEIGHBORHOOD ASSOCIATION, INC.**Current Principal Place of Business:**COMMUNITY MGT PROFESSIONALS
5401 S KIRKMAN #450
ORLANDO, FL 32819**New Principal Place of Business:**5955 T.G. LEE BLVD
SUITE #300
ORLANDO, FL 32822**Current Mailing Address:**COMMUNITY MGT PROFESSIONALS
5401 S KIRKMAN #450
ORLANDO, FL 32819**New Mailing Address:**5955 T.G. LEE BLVD
SUITE #300
ORLANDO, FL 32822**FEI Number:** 20-0645877**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired ()****Name and Address of Current Registered Agent:****Name and Address of New Registered Agent:**LELAND MANAGEMENT
5955 T.G. LEE BLVD
SUITE #300
ORLAND, FL 32822 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: REBECCA FURLOW

12/11/2008

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: D () Delete
Name: SHOEMAKER, JOHN B
Address: 61 W. COLONIAL DR.
City-St-Zip: ORLANDO, FL 32801

Title: DP (X) Change () Addition
Name: DICKSON, KEVIN
Address: 151 SOUTH HALL LANE #200
City-St-Zip: MAITLAND, FL 32751

Title: D () Delete
Name: COHEN, ODED
Address: 61 W. COLONIAL DR.
City-St-Zip: ORLANDO, FL 32801

Title: DV (X) Change () Addition
Name: PIAZZA, KETICA
Address: 151 SOUTH HALL LANE #200
City-St-Zip: MAITLAND, FL 32751

Title: D () Delete
Name: FANIEL, SYLVIA
Address: 61 W. COLONIAL DR.
City-St-Zip: ORLANDO, FL 32801

Title: STD (X) Change () Addition
Name: RASUMUSEN, TODD
Address: 151 SOUTH HALL LANE #200
City-St-Zip: MAITLAND, FL 32751

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: KEVIN DICKSON

DP

12/11/2008

Electronic Signature of Signing Officer or Director

Date