

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N95000000248

FILED
Apr 03, 2009
Secretary of State

Entity Name: SOUTHPOINTE HOMEOWNER'S ASSOCIATION AT RIVER BRIDGE, INC.

Current Principal Place of Business:

2950 JOG RD.
GREENACRES, FL 33467

New Principal Place of Business:

Current Mailing Address:

2950 JOG RD.
SUITE B
GREENACRES, FL 33467

New Mailing Address:

FEI Number: 65-0610171

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GELFAND, MICHAEL J ESQ.
ONE CLEARLAKE CENTRE, SUITE 1010
250 SOUTH AUSTRALIAN AVENUE
WEST PALM BEACH, FL 334015014 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: P () Delete
Name: REICH, HOWARD
Address: 2715 POINTE CIR
City-St-Zip: W. PALM BEACH, FL 33413

Title: V () Delete
Name: VOGEL, JERRY
Address: 2751 POINTE CIRCLE
City-St-Zip: WEST PALM BEACH, FL 33413

Title: D () Delete
Name: ORLOFF, TOM
Address: 2727 POINTE CIRCLE
City-St-Zip: WEST PALM BEACH, FL 33715

Title: S () Delete
Name: JULES, ERWIN
Address: 2718 POINTE CIRCLE
City-St-Zip: W PALM BEACH, FL 33413

Title: D () Delete
Name: SPECK, MICHAEL
Address: 2725 PT CIR
City-St-Zip: WEST PALM BEACH, FL 33413

Title: T () Delete
Name: STEIN, LEN
Address: 2745 POINTE CIR
City-St-Zip: WEST PALM BEACH, FL 33413

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: D (X) Change () Addition
Name: ELGART, JAY
Address: 2741 PT CIR
City-St-Zip: WEST PALM BEACH, FL 33413

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: HOWARD REICH

P

04/03/2009

Electronic Signature of Signing Officer or Director

Date