2012 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT

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TI FILED

Mar 06, 2012

Secretary of State

Entity Name: STRATFORD POINTE HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business: New Principal Place of Business:

C/O BELLA VITA PROPERTY MANAGEMENT 2615 ARISTOCRAT DR MELBOURNE, FL 32901

Current Mailing Address: New Mailing Address:

P O BOX 120096 MELBOURNE, FL 32912

FEI Number: 59-3653102 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:

BELLA VITA PROPERTY MANAGEMENT
2615 ARISTOCRAT DR
MELBOURNE, FL 32901 US
ST. JOHN ROSSIN BURR & LEMME PA
1601 FORUM PLACE SUITE 700
WEST PALM BEACH, FL 33401 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: ROBERT B. BURR 03/06/2012

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title:

 Name:
 HRONEK, MICHELE

 Address:
 PO BOX 120096

 City-St-Zip:
 MELBOURNE, FL 32912

Title: VPS

 Name:
 BERNKOPF, PAUL

 Address:
 PO BOX 120096

 City-St-Zip:
 MELBOURNE, FL 32912

Title:

 Name:
 HRINKO, DANIEL

 Address:
 PO BOX 120096

 City-St-Zip:
 MELBOURNE, FL 32912

Title: F

 Name:
 CONRAD, JANET

 Address:
 PO BOX 120096

 City-St-Zip:
 MELBOURNE, FL 32912

Title: D

Name: BEACHLEY, PRISCILLA
Address: PO BOX 120096
City-St-Zip: MELBOURNE, FL 32912

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: JANET CONRAD P 03/06/2012