

**2021 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N00000001819

**FILED**  
**Jan 22, 2021**  
**Secretary of State**  
**1238993155CC**

**Entity Name:** GRAND POINTE EAST HOMEOWNERS ASSOCIATION, INC.

**Current Principal Place of Business:**

1352 AUTUMN BREEZE CIRCLE  
GULF BREEZE, FL 32563

**Current Mailing Address:**

P.O. BOX 104  
GULF BREEZE, FL 32561

**FEI Number:** 59-3751114

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

MILLER, WILLIAM THOMAS JAMES  
1221 AUTUMN BREEZE CIRCLE  
GULF BREEZE, FL 32563 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:** WILLIAM T MILLER

01/22/2021

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title           TREASURER, SECRETARY  
Name           BOKLAGE, BILLIE  
Address        1281 AUTUMN BREEZE CIR  
City-State-Zip: GULF BREEZE FL 32563

Title           VP  
Name           STINSON, BILL  
Address        1169 AUTUMN BREEZE CIR  
City-State-Zip: GULF BREEZE FL 32563

Title           P  
Name           ROBERT, REDDICK  
Address        1356 AUTUMN BREEZE CIR  
City-State-Zip: GULF BREEZE FL 32563

Title           DIRECTOR  
Name           DAVIS, PAUL  
Address        1236 AUTUMN BREEZE CIR  
City-State-Zip: GULF BREEZE FL 32563

Title           DIRECTOR  
Name           WEEKS, JAMES  
Address        1264 AUTUMN BREEZE CIR  
City-State-Zip: GULF BREEZE FL 32563

*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:** ROBERT REDDICK

**PRESIDENT**

01/22/2021

Electronic Signature of Signing Officer/Director Detail

Date