

**2015 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N00000001819

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

**FILED**  
**Apr 01, 2015**  
**Secretary of State**  
**CC1592332044**

**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:**

BLANKENSHIP, SUZANNE ESQ  
139 EAST GOVERNMENT STREET  
PENSACOLA, FL 32502 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:** \_\_\_\_\_

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title S  
Name MILLER, BILL  
Address 1221 AUTUMN BREEZE CIR  
City-State-Zip: GULF BREEZE FL 32563

Title DIRECTOR  
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 VP  
Name BURT, MICHAEL  
Address 1268 AUTUMN BREEZE CIR  
City-State-Zip: GULF BREEZE FL 32563

Title TREASURER  
Name GREASEL, JOHN  
Address 1285 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**

**04/01/2015**

Electronic Signature of Signing Officer/Director Detail

Date