

**2018 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N00208

**Entity Name:** NORTHPOINTE HOMEOWNERS ASSOCIATION, INC., OF PALM BEACH COUNTY

**FILED**  
**Mar 07, 2018**  
**Secretary of State**  
**CC3871027676**

**Current Principal Place of Business:**

C/O TALLFIELD MANAGEMENT  
12765 W. FOREST HILL BLVD. STE 1320  
WELLINGTON, FL 33414

**Current Mailing Address:**

C/O TALLFIELD MANAGEMENT  
PO BOX 212995  
ROYAL PALM, FL 33421 US

**FEI Number: 59-2467124**

**Certificate of Status Desired: No**

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

BACKER LAW FIRM, P.A.  
THE ARBOR, SUITE 420  
400 SOUTH DIXIE HIGHWAY  
BOCA RATON, FL 33432 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            PRESIDENT  
Name            SEXTON, DEBORAH  
Address        C/O TALLFIELD MANAGEMENT  
                 PO BOX 212995  
City-State-Zip: ROYAL PALM FL 33421

Title            TREASURER  
Name            HARA HUSH, SHAWN  
Address        C/O TALLFIELD MANAGEMENT  
                 PO BOX 212995  
City-State-Zip: ROYAL PALM FL 33421

Title            SECRETARY  
Name            CHIASSON, DENIS  
Address        C/O TALLFIELD MANAGEMENT  
                 PO BOX 212995  
City-State-Zip: ROYAL PALM FL 33421

*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: DEBORAH SEXTON**

**PRESIDENT**

**03/07/2018**

Electronic Signature of Signing Officer/Director Detail

Date