2023 FLORIDA NOT FOR PROFIT CORPORATION REINSTATEMENT

FILED
Dec 19, 2023
Secretary of State
6417573860CR

DOCUMENT# N04000006078

Entity Name: POINTE NORTH HOMEOWNERS' ASSOCIATION, INC.

Current Principal Place of Business:

1616 METROPOLITAN CIRCLE, SUITE C
TALLAHASSEE, FL 32308

Current Mailing Address:

POST OFFICE BOX 11143
TALLAHASSEE, FL 32302 US

FEI Number: 20-2957872

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

FLORIDA ASSOCIATION & PROPERTY MANAGEMENT, INC.
1616 METROPOLITAN CIRCLE, SUITE C
TALLAHASSEE, FL 32308 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: JOANIE TROTMAN 12/19/2023

Electronic Signature of Registered Agent — Date

Officer/Director Detail :

Title	DST
Name	OGLESBY, DAVID B SR.
Address	POST OFFICE BOX 11143
City-State-Zip:	TALLAHASSEE FL 32302

Title	D
Name	TOLOMEO, BRIAN M
Address	POST OFFICE BOX 11143
City-State-Zip:	TALLAHASSEE FL 32302

Title	D
Name	OGLESBY, BRUCE
Address	POST OFFICE BOX 11143
City-State-Zip:	TALLAHASSEE FL 32302

Title	DVP
Name	HOPPE, STEVEN
Address	POST OFFICE BOX 11143
City-State-Zip:	TALLAHASSEE FL 32302

Title	DP
Name	PILZ, DAN
Address	POST OFFICE BOX 11143
City-State-Zip:	TALLAHASSEE FL 32302

Title	REGISTERED AGENT
Name	FLORIDA ASSOCIATION & PROPERTY MANAGEMENT, INC.
Address	POST OFFICE BOX 11143
City-State-Zip:	TALLAHASSEE FL 32302

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: JOANIE TROTMAN CAM 12/19/2023

Electronic Signature of Signing Officer/Director Detail — Date