

2017 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N99000000298

Entity Name: COMPASS POINTE COMMUNITY ASSOCIATION, INC.

Current Principal Place of Business:

707 ROCHESTER DR.
W. MELBOURNE, FL 32904

Current Mailing Address:

707 ROCHESTER DRIVE
W. MELBOURNE, FL 32904 US

FEI Number: 59-3558549

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

LICSKO, SHIRLEY A
707 ROCHESTER DRIVE
W. MELBOURNE, FL 32904 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: SHIRLEY A LICSKO

04/19/2017

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title DIRECTOR, PRESIDENT
Name CHMIEL, EDWARD
Address 707 ROCHESTER DR.
City-State-Zip: W. MELBOURNE FL 32904

Title DIRECTOR, VP
Name FISHKIN, MICHELE
Address 707 ROCHESTER DRIVE
City-State-Zip: W. MELBOURNE FL 32904

Title DIRECTOR, SECRETARY
Name LICSKO, SHIRLEY A
Address 707 ROCHESTER DR.
City-State-Zip: W. MELBOURNE FL 32904

Title DIRECTOR, TREASURER
Name WILDERMUTH, RON
Address 707 ROCHESTER DRIVE
City-State-Zip: W.MELBOURNE FL 32904

Title DIRECTOR
Name TARANTELLI, RAYMOND
Address 707 ROCHESTER DRIVE
City-State-Zip: W.MELBOURNE FL 32904

Title DIRECTOR
Name SHIBLEY, IVAN
Address 707 ROCHESTER DRIVE
City-State-Zip: W. MELBOURNE FL 32904

Title DIRECTOR
Name COMULADA, FELIX
Address 707 ROCHESTER DR.
City-State-Zip: W. MELBOURNE FL 32904

Title DIRECTOR
Name GREENE, WILLIAM
Address 707 ROCHESTER DR.
City-State-Zip: W. MELBOURNE FL 32904

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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: SHIRLEY A LICSKO

04/19/2017

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title DIRECTOR
Name FISHKIN, MICHELLE
Address 707 ROCHESTER DR.
City-State-Zip: W. MELBOURNE FL 32904

Title DIRECTOR
Name PIETROVICH, WALTER
Address 707 ROCHESTER DR.
City-State-Zip: W. MELBOURNE FL 32904