

**2020 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P00000112508

**Entity Name:** CENTRE POINTE, INC.**Current Principal Place of Business:**516 NORTH ADAMS ST  
TALLAHASSEE, FL 32301**Current Mailing Address:**4320 W. KENNEDY BLVD.  
SUITE 200  
TAMPA, FL 33609 US**FEI Number:** 59-3685981**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**CARLA, LUKE  
516 NORTH ADAMS ST  
TALLAHASSEE, FL 32301 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:** CARLA LUKE

02/05/2020

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

|                 |                      |
|-----------------|----------------------|
| Title           | D                    |
| Name            | BOUTWELL, KEN        |
| Address         | 3431 CEDAR LN        |
| City-State-Zip: | TALLAHASSEE FL 32312 |

|                 |                       |
|-----------------|-----------------------|
| Title           | D                     |
| Name            | CARUTHERS, J K        |
| Address         | 4044 BRANDON HILL DR. |
| City-State-Zip: | TALLAHASSEE FL 32309  |

|                 |                       |
|-----------------|-----------------------|
| Title           | D                     |
| Name            | HUMBLE, ED            |
| Address         | 10948 KNIGHT COURT SE |
| City-State-Zip: | OLYMPIA WA 98501      |

|                 |                       |
|-----------------|-----------------------|
| Title           | D                     |
| Name            | JUAREZ, MICHELLE      |
| Address         | 1880 CHARDONNAY PLACE |
| City-State-Zip: | TALLAHASSEE FL 32317  |

|                 |                      |
|-----------------|----------------------|
| Title           | D                    |
| Name            | SEAMON, FRED         |
| Address         | 1122 SEMINOLE DR     |
| City-State-Zip: | TALLAHASSEE FL 32301 |

|                 |                    |
|-----------------|--------------------|
| Title           | D                  |
| Name            | CROMWELL, DODDS    |
| Address         | 3638 LOVEJOY CT NE |
| City-State-Zip: | OLYMPIA WA 98506   |

*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 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE:** KEN BOUTWELL

02/05/2020

Electronic Signature of Signing Officer/Director Detail

Date