

2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 724243

FILED
Jan 11, 2012
Secretary of State

Entity Name: POINT EAST ASSOCIATION, INC.

Current Principal Place of Business:

3801 S ATLANTIC AVE
NEW SMYRNA BEACH, FL 32169

New Principal Place of Business:

Current Mailing Address:

3801 S ATLANTIC AVE
NEW SMYRNA BEACH, FL 32169

New Mailing Address:

FEI Number: 59-1465022

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ISON, MICHAEL
3010 HOLIDAY AVE
APOPKA, FL 32703 US

Name and Address of New Registered Agent:

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

OFFICERS AND DIRECTORS:

Title: P
Name: ISON, MICHAEL
Address: 3010 HOLIDAY AVE
City-St-Zip: APOPKA, FL 327036632

Title: D
Name: SHEEHAN, JOHN
Address: 185 BIRCHWOOD DR
City-St-Zip: MAITLAND, FL 32751

Title: T
Name: HOLLINGSWORTH, BRAD
Address: 185 DOUGLAS AVE
City-St-Zip: ALTAMONTE SPRINGS, FL 32714

Title: VP
Name: ABBATICCHIO, TAFFY
Address: 31 ANDREA DR
City-St-Zip: NEW SMYRNA BEACH, FL 32168

Title: D
Name: LEONE, CAL
Address: 405 N. THISTLE LANE
City-St-Zip: MAITLAND, FL 32751

Title: S
Name: SCOTT, CINDY
Address: P O BOX 392
City-St-Zip: TAVARES, FL 32778 US

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: MIKE ISON

P

01/11/2012

Electronic Signature of Signing Officer or Director

Date