

# 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 724841

FILED  
Mar 04, 2006  
Secretary of State

Entity Name: POINT MATANZAS MANAGEMENT INC

## Current Principal Place of Business:

7265 A-1-A SOUTH  
UNIT B-7  
ST AUGUSTINE, FL 32080

## New Principal Place of Business:

## Current Mailing Address:

7265 A-1-A SOUTH  
UNIT B-7  
ST AUGUSTINE, FL 32080

## New Mailing Address:

FEI Number: 59-1479131

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

TRIVERS, JAMES E  
7265 A1A SOUTH  
UNIT B7  
ST AUGUSTINE, FL 32080 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: SD ( ) Delete  
Name: MARY GERLITZKI,  
Address: 7265 A1A S #D-5  
City-St-Zip: ST AUGUSTINE, FL 32086

Title: VD ( ) Delete  
Name: GEORGE HIN,  
Address: 7265 A1A S #A-4  
City-St-Zip: ST AUGUSTINE, FL 32086

Title: TD ( ) Delete  
Name: TRAVERS, JAMES  
Address: 7265 A1A SOUTH B7  
City-St-Zip: ST. AUGUSTINE, FL

Title: PD ( ) Delete  
Name: HOLLOWAY, SHINER C  
Address: 7265 AIA S UNIT D7  
City-St-Zip: SAINT AUGUSTINE, FL 32086

Title: D ( ) Delete  
Name: FRANKLIN, JEAN  
Address: 7265 AIA SOUTH B8  
City-St-Zip: ST. AUGUSTINE, FL 32080

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: SD (X) Change ( ) Addition  
Name: MARY GERLITZKI,  
Address: 7265 A1A S #D-5  
City-St-Zip: ST AUGUSTINE, FL 32080

Title: VD (X) Change ( ) Addition  
Name: GEORGE HIN,  
Address: 7265 A1A S #A-4  
City-St-Zip: ST AUGUSTINE, FL 32080

Title: TD (X) Change ( ) Addition  
Name: TRAVERS, JAMES  
Address: 7265 A1A SOUTH B7  
City-St-Zip: ST. AUGUSTINE, FL 32082

Title: D (X) Change ( ) Addition  
Name: LONG, BRAD  
Address: 3711 BECHTREE DRIVE  
City-St-Zip: ORLANDO, FL 32835

Title: PD (X) Change ( ) Addition  
Name: FRANKLIN, JEAN  
Address: 7265 AIA SOUTH B8  
City-St-Zip: ST. AUGUSTINE, FL 32080

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: JAMES E. TRAVERS

TD

03/04/2006

Electronic Signature of Signing Officer or Director

Date