

2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# 726371

FILED
Mar 04, 2003
Secretary of State

Entity Name: POINTE WEST CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

11945 PARADISE POINTE WAY
NEW PORT RICHEY, FL 34654

New Principal Place of Business:

Current Mailing Address:

11945 PARADISE POINTE WAY
NEW PORT RICHEY, FL 34654

New Mailing Address:

FEI Number: 59-1709341

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

REINHART, DEBRA
C/O RESOURCE MANAGEMENT, INC.
103 CLEVELAND AVE. SW
LARGO, FL 33770 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: D () Delete
Name: AMBROGIO, FRANK
Address: 11945 PARADISE POINTE WAY
City-St-Zip: NEW PORT RICHEY, FL

Title: PD () Delete
Name: KILCOIN, GERRY
Address: 11945 PARADISE POINTE WAY
City-St-Zip: NEW PORT RICHEY, FL

Title: T () Delete
Name: HATHAWAY, ROB
Address: 11945 PARADISE POINTE WAY
City-St-Zip: NEW PORT RICHEY, FL

Title: V () Delete
Name: GAY, ART
Address: 11945 PARADISE POINTE WAY
City-St-Zip: NEW PORT RICHEY, FL 34654

Title: D () Delete
Name: AMBROGIO, FRANK
Address: 11945 PARADISE POINTE WAY
City-St-Zip: NEW PORT RICHEY, FL 34654

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: V (X) Change () Addition
Name: KILCOIN, GERRY
Address: 11945 PARADISE POINTE WAY
City-St-Zip: NEW PORT RICHEY, FL

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: PD (X) Change () Addition
Name: GAY, ART
Address: 11945 PARADISE POINTE WAY
City-St-Zip: NEW PORT RICHEY, FL 34654

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: S () Change (X) Addition
Name: WILKINS, PAT
Address: 11945 PARADISE POINTE WAY
City-St-Zip: NEW PORT RICHEY, FL 34654

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: PAT WILKINS

S

03/04/2003

Electronic Signature of Signing Officer or Director

Date