

2001 UNIFORM BUSINESS-REPORT (UBR)

DOCUMENT # 728881

1. Entity Name

COUNTRY CLUB POINTE PROPERTY OWNER'S ASSOCIATION

Principal Place of Business

3009 GOLFVIEW DRIVE
VERO BEACH FL 32960
US

Mailing Address

3009 GOLFVIEW DRIVE
VERO BEACH FL 32960
US

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

59-2244916

Applied For

Not Applicable

5. Certificate of Status Desired

☒

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

RHODES, SOPHIE
3009 GOLFVIEW DRIVE
VERO BEACH FL 32960

7. Name and Address of New Registered Agent

Name: Prescott C. Terry
Street Address (P.O. Box Number is Not Acceptable): 3025 Golfview Drive
City: Vero Beach FL Zip Code: 32960

8. 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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW:
FEE IS \$61.25

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

Make Check Payable to
Department of State

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD WOOD, NANCY 3007 CALCUTTA DRIVE VERO BEACH FL 32960	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V KRETSCH, KAREN 610 GOLFVIEW DR VERO BEACH FL 32960	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S SIMONS, CELIA 3055 PAR DRIVE VERO BEACH FL 32960	<input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T RHODES, SOPHIE 3009 GOLFVIEW DRIVE VERO BEACH FL 32960	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D CONNELLY, BRIAN 3000 PAR DRIVE VERO BEACH FL 32960	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D HILLMAN, SUSAN 3003 GOLFVIEW DR VERO BEACH FL 32960	<input checked="" type="checkbox"/> Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD WOOD, NANCY B. 3007 CALCUTTA DRIVE VERO BEACH, FL 32960	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Director Bonnie Degan 1315 Nassau Dr. VERO Beach, FL 32960	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Treasurer Prescott C. Terry 3025 Golfview Dr Vero Beach, FL 32960	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Prescott C. Terry	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Director Robert Brown 3011 Calcutta Dr. Vero Beach, FL 32960	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition

12. I hereby certify that the information supplied with this filing does not qualify 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *[Signature]* REQUIRED

3/19/01

561-770-9421

FILED
May 16, 2001 8:00 am
Secretary of State

05-16-2001 90169 001 ****61.25

05-16-2001 90169 002 ****8.75



DO NOT WRITE IN THIS SPACE

CR2E037 (10/00)