2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT#730053

FILED Feb 06, 2009 Secretary of State

Entity Name: CANNON POINT MAINTENANCE ASSOCIATION, INC.

Current Principal Place of Business: New Principal Place of Business:

P O BOX 15382 14181 SW 15 CT LAUDERHILL, FL 33328 DAVIE, FL 33325

Current Mailing Address: New Mailing Address:

P O BOX 15382 P O BOX 15382

LAUDERHILL, FL 33328 FT. LAUDERDALE, FL 33328

FEI Number: 65-0128722 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

BRUCE, MEGEE

14181 SW 15TH COURT
FORT LAUDERDALE, FL 33325 US

BRUCE, MEGEE

14181 SW 15TH COURT

DAVIE, FL 33325 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: 02/06/2009

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PDD () Delete Title: PDD (X) Change () Addition

 Name:
 RAMRUP, HANRAN
 Name:
 DOUG, FLEISHMAN

 Address:
 5601 NW 27TH COURT
 Address:
 7405 NW 57 ST

 City-St-Zip:
 LAUDERHILL, FL 33313
 City-St-Zip:
 TAMRAC, FL 33319

 Title:
 SD () Delete
 Title:
 SD (X) Change () Addition

 Name:
 GUTTIERREZ, LINDA
 Name:
 CHARLOTTE, MEGEE

 Address:
 5721 NW 28TH ST
 Address:
 14181 SW 15 CT

 City-St-Zip:
 LAUDERHILL, FL 33313
 City-St-Zip:
 DAVIE, FL 33325

 Name:
 MAGEE, BRÜCE
 Name:
 MEGEE, BRÜCE

 Address:
 14181 SW 15TH CT
 Address:
 14181 SW 15TH CT

 City-St-Zip:
 DAVIE, FL 33325
 City-St-Zip:
 DAVIE, FL 33325

I hereby certify that the information supplied with this filing does not qualify 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: BRUCE MEGEE TD 02/06/2009