


2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Feb 16, 2005 8:00 am
Secretary of State

02-16-2005 90041 031 ****61.25


DOCUMENT # 733698
 1. Entity Name
THE POINTE ASSOCIATION, INC.



Principal Place of Business Mailing Address
9390 MIDNIGHT PASS RD **9390 MIDNIGHT PASS RD**
SARASOTA FL 34242-2924 **SARASOTA FL 34242-2924**

2. Principal Place of Business 3. Mailing Address
 Suite, Apt. #, etc. Suite, Apt. #, etc.
 City & State City & State
 Zip Country Zip Country

50016115



1st MOORE CR2E037 (10/04)

4. FEI Number Applied For
59-1606537 Not Applicable

5. Certificate of Status Desired **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent
WELLS, KEVIN T ESQ
2033 MAIN STREET, SUITE 403
SARASOTA FL 34237

7. Name and Address of New Registered Agent
 Name
 Street Address (P.O. Box Number is Not Acceptable)
 City **FL** Zip Code

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

FILE NOW: FEE IS \$61.25
Due By May 1, 2005

9. Election Campaign Financing Trust Fund Contribution. **\$5.00 May Be Added to Fees**

Make Check Payable to Florida Department of State

10. OFFICERS AND DIRECTORS

TITLE	TD	<input checked="" type="checkbox"/> Delete
NAME	JACOBSON, WARREN	
STREET ADDRESS	9397 MIDNIGHT PASS RD #401	
CITY-ST-ZIP	SARASOTA FL 34242	
TITLE	P	<input checked="" type="checkbox"/> Delete
NAME	CASINELLI, JOSEPH	
STREET ADDRESS	9397 MIDNIGHT PASS RD. #207	
CITY-ST-ZIP	SARASOTA FL 34242	
TITLE	D	<input type="checkbox"/> Delete
NAME	GOODWIN, JORTN	
STREET ADDRESS	9397 MIDNIGHT PASS RD #806	
CITY-ST-ZIP	SARASOTA FL 34242	
TITLE	V	<input checked="" type="checkbox"/> Delete
NAME	REBELLO, JOHN	
STREET ADDRESS	9393 MIDNIGHT PASS RD. #202	
CITY-ST-ZIP	SARASOTA FL 34242	
TITLE	D	<input type="checkbox"/> Delete
NAME	TRANTER, THOMAS	
STREET ADDRESS	9397 MIDNIGHT PASS RD #705	
CITY-ST-ZIP	SARASOTA FL 34242	
TITLE	SD	<input type="checkbox"/> Delete
NAME	KELLEY, VIRGINIA	
STREET ADDRESS	9397 MIDNIGHT PASS RD #604	
CITY-ST-ZIP	SARASOTA FL 34242	

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	FIELDS, GEORGE	
STREET ADDRESS	9393 MIDNIGHT PASS RD	
CITY-ST-ZIP	SARASOTA, FL 34242	
TITLE	D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	MOLNAR, HELEN	
STREET ADDRESS	9397 MIDNIGHT PASS RD	
CITY-ST-ZIP	SARASOTA, FL 34242	
TITLE	PRES	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	GOODWIN, JOHN	
STREET ADDRESS		
CITY-ST-ZIP		
TITLE	VP	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	FREEMAN, JOHN	
STREET ADDRESS	9393 MIDNIGHT PASS RD	
CITY-ST-ZIP	SARASOTA, FL 34242	
TITLE	TD	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	TRANTER, THOMAS	
STREET ADDRESS		
CITY-ST-ZIP		
TITLE	D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	NEWTON, STEVE	
STREET ADDRESS	9397 MIDNIGHT PASS RD	
CITY-ST-ZIP	SARASOTA, FL 34242	

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: John H Freeman Vice-President 941-349-6446

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #