2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

Secretary of State **DOCUMENT #745638** 04-14-2008 90044 005 ****61.25 1. Entity Name SOUTH POINTE VILLAS CONDOMINIUM MASTER ASSOCIATION, INC. Principal Place of Business Mailing Address 6300 S POINTE BLVD C/O APEX MGMT 4000///2 11595 KELLY RD 110 FORT MYERS, FL 33919 US FORT MYERS, FL 33908 US 2. Principal Place of Business - No P.O. Box # 3. Mailing Address 13611 Mc GRECOR BLVD Suite, Apt. #, etc. Suite, Apt. #, etc. 04022008 Cha-NP CR2E037 (12/06) STE 6 City & State City & State FEI Number 59-1996984 Applied For FLFORT MYERS Not Applicable Country U.S.A Zip Zip Country \$8.75 Additional 5. Certificate of Status Desired 33919 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent SERVICES APEX MGMT SRVS., OF LEE CTY INC MANAGE MENT 11595 KELLY RD STE 110 FORT MYERS, FL 33908 ^{Zin} (300 339 19 FORT MYERS 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 9. Election Campaign Financing Make check payable to Filing Fee is \$61.25 \$5.00 May Be Trust Fund Contribution. Due by May 1, 2008 Added to Fees Florida Department of State OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 10. 11. Change VD TITLE TITLE ☐ Delete SUNDAY, WILLIAM NAME NAME 6300 SOUTH POINTE BLVD#235 6300 S POINTE BLVD 235 STREET ADORESS STREET ADDRESS FORT MYERS, FL 33919 CITY-ST-ZIP CITY-ST-ZIF MLE STD ☐ Delete TITLE ☐ Change ☐ Addition DECKER, GERALDINE NAME NAME 6300 SOUTH POINTE BLVD #450 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP FORT MYERS, FL 33919 TILE ☐ Change ☐ Addition Delete TITLE NAME MURRELL, WILLIAM NAME 6300 S POINTE BLVD 430 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP FORT MYERS, FL 33919 CITY-ST-ZIP TITLE Delete TITLE Change ☐ Addition WILKES, ANNA MARIE NAME NAME 6300 SOUTH POINT BLVD #136 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP FORT MYERS, FL 33919 CITY-ST-ZIP Change TITLE ■ Addition TITLE Delete ROBINSON, CLAIR NAME NAME 6300 SOUTH POINTE BLUD#333 6300 SOUTH POINT BLVD #333 STREET ADDRESS STREET ADDRESS FORT MYERS, FL 33919 CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE Change Addition MALE BENEDETTO, JOANN STREIT ADDRESS 6300 SOUTH POINTE BLVD#115 NAME STREET ADDRESS CITY-ST-ZIP

FILED

contained in Chapter 119, Florida Statutes. I further certify that the information

le under oath; that I am an officer or director

Apr 14, 2008 8:00 am