

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 745947

FILED
Apr 05, 2007
Secretary of State

Entity Name: CEDAR POINTE CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

10730 US 19 SUITE 17
PORT RICHEY, FL 34668

New Principal Place of Business:

5901 US 19 N
STE 7Q
NEW PORT RICHEY, FL 34652

Current Mailing Address:

10730 US 19 SUITE 17
PORT RICHEY, FL 34668

New Mailing Address:

5901 US 19 N
STE 7Q
NEW PORT RICHEY, FL 34652

FEI Number: 59-1311010

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

QUALIFIED PROP. MGMT INC
10730 US 19, SUITE 17
PORT RICHEY, FL 34668 US

Name and Address of New Registered Agent:

QUALIFIED PROP. MGMT INC
5901 US 19 N
STE 7Q
NEW PORT RICHEY, FL 34652 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: MARY A WHITE

04/05/2007

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: BENTON, ROBERT
Address: 10730 US 19, STE 17
City-St-Zip: PORT RICHEY, FL

Title: SD () Delete
Name: KLEIN, LES
Address: 10730 US 19, STE 17
City-St-Zip: PORT RICHEY, FL

Title: VTD () Delete
Name: LUSZCAK, WALLY
Address: 10730 US 19, STE 17
City-St-Zip: PORT RICHEY, FL

Title: D () Delete
Name: DEDONICIS, ERMANNNO
Address: 10730 US 19, STE 17
City-St-Zip: PORT RICHEY, FL

Title: D () Delete
Name: MCSALIS, MARY ANN
Address: 10730 US 19, STE 17
City-St-Zip: PORT RICHEY, FL

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: BENTON, ROBERT
Address: 5901 US 19 N, STE 7Q
City-St-Zip: NEW PORT RICHEY, FL 34652

Title: SD (X) Change () Addition
Name: DEDONICIS, ERMANNNO
Address: 5901 US 19 N, STE 7Q
City-St-Zip: NEW PORT RICHEY, FL 34652

Title: VD (X) Change () Addition
Name: LUSZCAK, JR, WALTER
Address: 5901 US 19 N, STE 7Q
City-St-Zip: NEW PORT RICHEY, FL 34652

Title: TD (X) Change () Addition
Name: KLEIN, LES
Address: 5901 US 19 N, STE 7Q
City-St-Zip: NEW PORT RICHEY, FL 34652

Title: D (X) Change () Addition
Name: MCSALIS, MARY ANN
Address: 5901 US 19 N, STE 7Q
City-St-Zip: NEW PORT RICHEY, FL 34652

I hereby certify that the information supplied with this filing does not qualify for the 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: MARY A WHITE

CEO

04/05/2007

Electronic Signature of Signing Officer or Director

Date