

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 749078

FILED
Mar 31, 2009
Secretary of State

Entity Name: JOE'S POINT HOMEOWNERS' ASSOCIATION, INC.

Current Principal Place of Business:

969 S FEDERAL HWY
#401
STUART, FL 34994 US

New Principal Place of Business:

Current Mailing Address:

969 S FEDERAL HWY
#401
STUART, FL 34994 US

New Mailing Address:

FEI Number: 59-2069628 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GOLDBAUM, LENARD
969 S FEDERAL HWY
STE 401
STUART, FL 34994 US

Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: MICHAUD, WILLIAM
Address: 4302 NE JOES POINT RD
City-St-Zip: STUART, FL 34996

Title: SD () Delete
Name: BLYN, DON
Address: 4210 NE JOES POINT RD
City-St-Zip: STUART, FL 34996

Title: TD () Delete
Name: FISHER, CARL
Address: 4250 NE JOES POINT RD
City-St-Zip: STUART, FL 34996

Title: VPD () Delete
Name: ROBERT, RYBA
Address: 3940 NE JOES POINT RD
City-St-Zip: STUART, FL 34996

Title: D () Delete
Name: KAMM, GERARD
Address: 4361 NE JOES POINT RD
City-St-Zip: STUART, FL 34996

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: D (X) Change () Addition
Name: DANIELSON, LON
Address: 4210 NE JOES POINT RD
City-St-Zip: STUART, FL 34996

Title: VPD (X) Change () Addition
Name: KAMM, GERARD
Address: 4361 NE JOES POINT RD
City-St-Zip: STUART, FL 34996

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: LENARD GOLDBAUM

Electronic Signature of Signing Officer or Director

AGNT

03/31/2009

Date