

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 757771

FILED
Apr 08, 2009
Secretary of State

Entity Name: THE VILLAS OF POINTE WEST CONDOMINIUM OWNERS ASSOCIATION, INC.

Current Principal Place of Business:

6105 WALNUT STREET WEST
BRADENTON, FL 34209

New Principal Place of Business:

Current Mailing Address:

6105 WALNUT STREET WEST
BRADENTON, FL 34209

New Mailing Address:

4301 32ND STREET WEST
A20
BRADENTON, FL 34205

FEI Number: 59-2528244

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HUFFMAN, BARBARA N
6104 EVERGREEN CIRCLE
BRADENTON, FL 34209 US

Name and Address of New Registered Agent:

C & S MANAGEMENT SERVICES, INC.
4301 32ND STREET W
SUITE A20
BRADENTON, FL 34205 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: DEBRA SPRUELL

04/08/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: REINHOLD, VERONICA
Address: 6107 EVERGREEN CIRCLE UNIT 10B
City-St-Zip: BRADENTON, FL 34209

Title: T () Delete
Name: SPRINGER, ROBERT
Address: 6108 EVERGREEN CIRCLE UNIT 2D
City-St-Zip: BRADENTON, FL 34209

Title: S () Delete
Name: HUFFMAN, BARBARA
Address: 6104 EVERGREEN CIRCLE UNIT 12D
City-St-Zip: BRADENTON, FL 34209

Title: VP () Delete
Name: VOGELI, VANCE
Address: 6107 EVERGREEN CIRCLE UNIT 10A
City-St-Zip: BRADENTON, FL 34209

Title: D (X) Delete
Name: OBERENTER, SUSAN
Address: 6108 EVERGREEN CIR #2D
City-St-Zip: BRADENTON, FL 34209

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: T (X) Change () Addition
Name: OBERENDER, SUSAN
Address: 6108 WALNUT STREET #2D
City-St-Zip: BRADENTON, FL 34209

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

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

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

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: BARBARA HUFFMAN

S

04/08/2009

Electronic Signature of Signing Officer or Director

Date