2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED Apr 24, 2006 8:00 am Secretary of State

04-24-2006 90364 026 ****61.25

1. Entity Name VIEWPOINT CONDOMINIUM ASSOCIATION, INC.									· · · · ·				- · - ·
Principal Place of Business 55 ROGERS ST CLEARWATER, FL 33756				Mailing Address 55 ROGERS ST CLEARWATER, FL 33756				60029851					
2. Principal P	Tace of Busin	ness	3. Mailing Address										
Suite, Apt. #, etc.			Suite, Apt. #, etc.					04112006	Chg-NP	c	R2E03	7 (11/05)	
City & State			City & State					4. FEI Number 59-2109	802			├	plied For at Applicable
Zip	Zip Country		Zip		Coi	untry		5. Certificate of	of Status Desi	ired		\$8.75 Add ee Require	
	6. Name	and Address of Curren	t Registere	d Agent		L		7. Name and	Address of N	lew Regi	stered A	gent	
DUNCAN, CHRIS 55 ROGERS STREET #203 CLEARWATER, FL 33756						Street A	Mi- ddress (F	Tress (P.O. Box Number's Not Acceptable)					
CLEARWA	NIEK, FL	,33750 .a		City					1		FL	Zip Code	9
The above named entity submits this statement for the purpose of changing its registered office.						od office or		r construction	7.6 C	of Florida		1 22	13 4
SIGNATURE	tions of regis	tered agent.	nt and title if app		L N.Q.		mi-	the reinstating)		41	J 9 DATE	104	<u>'</u>
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		e is \$61.25 May 1, 2006		9. Election Car Trust Fund 0				\$5.00 May Be Added to Fees	•			payable to ment of St	
10.			DIRECTORS			tion.		Added to Fees		Florida	Depart	ment of St	ate
10. TITLE	Due by N	May 1, 2006 OFFICERS AND D	DIRECTORS		Contribut	tion.	5.0	Added to Fees ADDITIONS/CHA	INGES TO O	FICERS	Depart	ment of St	ate
TITLE	TD SMITH, D	May 1, 2006 OFFICERS AND D	DIRECTORS	Trust Fund (11.	E E	5.0	Added to Fees ADDITIONS/CHA	INGES TO O	FICERS	Depart	ment of SI	tate 10
TITLE NAME STREET ADDRESS	TD SMITH, D 55 ROGE	May 1, 2006 OFFICERS AND D DIANE RS ST P4	DIRECTORS	Trust Fund (11. IIIL NAM	tion.	55 Na 55	Added to Fees ADDITIONS/CHA COST Hu Rogers S	UNGESTO OI	Florida FFICERS	Depart	ment of SI	tate 10
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD SMITH, D 55 ROGE	May 1, 2006 OFFICERS AND D	DIRECTORS	Trust Fund (11. TITL NAM STR	E BE EET ADDRESS (-ST-ZIP	55 Na 55	Added to Fees ADDITIONS/CHA	UNGESTO OI	Florida FFICERS	Depart	ment of SI	10 Addition
TITLE NAME STREET ADDRESS	TD SMITH, D 55 ROGE CLEARW	May 1, 2006 OFFICERS AND D DIANE RS ST P4	DIRECTORS	Trust Fund (11. IIIL NAM	E NE EET ADDRESS /-ST-ZIP	55 Na 55 Cle	Added to Fees ADDITIONS/CHA Ancy Hu Rogars S Arwyte	gres des the sen	Florida	Depart	ment of SI	tate 10
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	TD SMITH, D 55 ROGE CLEARW VD MUYSKE 55 ROGE	OFFICERS AND DOMESTIC	DIRECTORS	Trust Fund (11. TITL NAM STRI CIT THAN STRI STRI STRI STRI STRI STRI STRI STRI	E BE SET ADDRESS (-ST-ZIP E BE BE BE BE BE BE BE BE BE	50 0 D B 55 5	Added to Fees ADDITIONS/CHA TOCY Hu Rogers Searwate Arwate	gles gles dei r FL 3	Florida FFICERS	Depart	ment of SI	10 Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	TD SMITH, D 55 ROGE CLEARW VD MUYSKE 55 ROGE CLEARW	OFFICERS AND DOMESTIC	DIRECTORS	Trust Fund (11. TITL NAM STRI CIT THAN STRI STRI STRI STRI STRI STRI STRI STRI	E NE EET ADDRESS (-ST-ZIP	50 D BOS CI	Added to Fees ADDITIONS/CHA Chay Hu Rogers S Rogers Rogers Runnato	ALESTOOM ALESTO	Florida FICERS FICERS	Depart	TRECTORS IN Change	10 Addition ZNAddition
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TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	TD SMITH, D 55 ROGE CLEARW VD MUYSKE 55 ROGE CLEARW D KOHL, JL	OFFICERS AND DOMESTIC OFFICERS AND DOMESTIC OFFICERS AND DOMESTIC OFFICERS ST #404 MATER, FL 33756 JITTA	DIRECTORS	Trust Fund (11. TITLE NAM STR CITY NAM STR CITY TITLE NAM STR CITY NAM STR	E E NE EET ADDRESS (-ST-ZIP E EET ADDRESS (-ST-ZIP E EET ADDRESS (-ST-ZIP E EET ADDRESS EET EET EET EET EET EET EET EET EET	SASSIP DESTAN	Added to Fees ADDITIONS/CHA ACY Hu Rogers S Arwate Eurwate	ghes dein FL3 Ampuic FL3	Florida FICERS FICERS	Depart	TRECTORS IN Change	10 Addition ZNAddition
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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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:

IGNATURE AND TYPED OF PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Ruth K. Hardick 4-17-06 727-442-