2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 03, 2004 8:00 am
Secretary of State
02-03-2004 90013 004 ****61.25

DOCUMENT # 758689

1. Entity Name
THE POINT PROPERTY OWNERS ASSOCIATION, INC.

Principal Place of Business	Mailing Address
1839 HARBOR ISLAND DRIVE SUITE 5 #196 ORANGE PARK, FL 32073 c/o Remax on Park ave	1177 PARK AVE SUITE 5 #196 ORANGE PARK, FL 32073

01222004 Chg-NP CR2E037 (10/03)

2. Principal Place of Business	3. Mailing Address
1008 Park ave	
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State: Orange Park, FL	City & State
Zip: 32073 Country: USA	Zip Country

4. FEI Number ~~59-2282446~~ ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
ALLEN-HALL, JANE 1839 HARBOR ISLAND DR ORANGE PARK, FL 32003	Name Street Address (P.O. Box Number is Not Acceptable) c/o Remax on Park ave 1008 Park ave City Orange Park FL Zip Code 32073

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 Jane Allen Hall 1-29-04
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

Filing Fee is $61.25
Due by May 1, 2004

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

Make check payable to Florida Department of State

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	ST LEWIS, LYNDA 316 SCENIC POINT LN ORANGE PARK, FL 32003	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VPD HAMMAN, JACK 317 SCENIC POINT LN ORANGE PARK, FL 32003	☑ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	P Sharon Griffin 320 Scenic Point Lane Orange Park, FL 32003	☐ Change ☑ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PD KEEBLE, CHARLES 311 SCENIC POINT LANE ORANGE PARK, FL 32003	☑ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VP Ron Mills 324 Scenic Point Lane Orange Park, FL 32003	☐ Change ☑ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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: Lynda Lewis 1-29-04 904 215-8124
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #