


# 2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Mar 16, 2004 8:00 am**  
**Secretary of State**


03-16-2004 90032 001 \*\*\*\*61.25

<b>DOCUMENT # 759522</b>	
1. Entity Name <b>POINTE WEST RECREATION, INC.</b>	

Principal Place of Business	Mailing Address
12651-SEMINOLE BLVD 13-J LARGO, FL 33778-2278 US	12651 SEMINOLE BLVD 13-J LARGO, FL 33778-2278 US

**DO NOT WRITE IN THIS SPACE**

34030000



03082004 No Chg-NP CR2E037 (10/03)

4. FEI Number 59-2136537	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent

CARTER, DAVID P., ESQ.  
TWIN TOWERS #2, STE 4, 12945 SEMINOLE BLVD  
LARGO, FL 33544

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IN THIS SPACE**

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: \_\_\_\_\_ DATE: \_\_\_\_\_  
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

Filing Fee is \$61.25 Due by May 1, 2004	9. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD BELL, ROBERT 12651 SEMINOLE BLVD #9M LARGO, FL 33778	PD O'CONNELL GENE 12651 SEMINOLE BLVD #120F LARGO FL 33778
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D FURRY, HARRY 12651 SEMINOLE BLVD, 14-C LARGO, FL 33778	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD CUSATE, FINA 12651 SEMINOLE BLVD #5B LARGO, FL 33778	SD CASHMAN, MYRNA 12651 SEMINOLE BLVD #13B LARGO FL 33778
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD BEN, ROBERT 12651 SEMINOLE BLVD #13-J LARGO, FL 33778	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D JAEGER, ROBERT 12651 SEMINOLE BLVD #11A LARGO, FL 33778	D SCHWAB BILL 12651 SEMINOLE BLVD #12J LARGO FL 33778
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D DAVID, DAVID MORGIA 12651 SEMINOLE BLVD, #21 LARGO, FL 33778	

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IN THIS SPACE**

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: Robert Ben ROBERT BEN MARCH 11/04  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #