

# 2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 761659

FILED  
Jul 06, 2005  
Secretary of State

**Entity Name:** POINT EAST OFFICE OWNER'S ASSOCIATION, INC.

**Current Principal Place of Business:**

1615 EAST VINE STREET  
KISSIMMEE, FL 34744

**New Principal Place of Business:**

**Current Mailing Address:**

1615 EAST VINE STREET  
KISSIMMEE, FL 34744

**New Mailing Address:**

**FEI Number:** 59-2252569      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**  
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

**Name and Address of Current Registered Agent:**

SIEGEL, BEVERLY M.  
1615 E. VINE STREET  
KISSIMMEE, FL 32743      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: SIEGEL, RONALD A.  
Address: 1615 E VINE ST  
City-St-Zip: KISSIMMEE, FL

Title: STD      ( ) Delete  
Name: SIEGEL, BEVERLY M.,  
Address: 1615 E. VINE ST.  
City-St-Zip: KISSIMMEE, FL

Title: VD      ( ) Delete  
Name: SIEGEL, BEVERLY M.  
Address: 1615 E VINE ST  
City-St-Zip: KISSIMMEE, FL

**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:

I hereby certify that the information supplied with this filing does not qualify for the 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 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: RONALD SIEGEL

PD

07/06/2005

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date