

**2012 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT****FILED**  
**Aug 22, 2012**  
**Secretary of State**

DOCUMENT# 762283

**Entity Name:** PIER POINT SOUTH CONDOMINIUM ASSOCIATION, INC.**Current Principal Place of Business:**390 A1A BEACH BLVD  
ST AUGUSTINE BCH., FL 32080**New Principal Place of Business:****Current Mailing Address:**390 A1A BEACH BLVD  
ST AUGUSTINE BCH., FL 32080**New Mailing Address:****FEI Number:** 59-2190633**FEI Number Applied For ( )****FEI Number Not Applicable ( )****Certificate of Status Desired ( )****Name and Address of Current Registered Agent:**ALLEN, LUANN  
33 OLD MISSION AVE  
SAINT AUGUSTINE, FL 32084 US**Name and Address of New Registered Agent:**STOWERS, LAURA  
390 A1A BEACH BLVD  
ST AUGUSTINE BCH., FL 32080 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: LAURA STOWERS

08/22/2012

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: P  
Name: UNDERWOOD, JAY  
Address: 390 A1A BEACH BLVD #1  
City-St-Zip: ST AUGUSTINE, FL 32080

Title: T  
Name: GENTRY, JOANNE  
Address: 390 A1A BEACH BLVD#62  
City-St-Zip: ST AUGUSTINE, FL 32080

Title: SEC  
Name: RAWL, HARRIET  
Address: 390 A1A BEACH BLVD #53  
City-St-Zip: ST AUGUSTINE, FL 32080

Title: VP  
Name: SPAHN, DIRK  
Address: 390 A1A BEACH BLVD #57  
City-St-Zip: ST AUGUSTINE, FL 32080

I hereby 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 all other like empowered.

SIGNATURE: LAURA STOWERS

RA

08/22/2012

Electronic Signature of Signing Officer or Director

Date