

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 762454

FILED
Feb 16, 2009
Secretary of State

Entity Name: POINTE WEST HOMEOWNERS' ASSOCIATION, INC.

Current Principal Place of Business:

6703 21ST AVE TERR W
BRADENTON, FL 34209 US

New Principal Place of Business:

Current Mailing Address:

6703-21ST AVE TER W
BRADENTON, FL 34209 US

New Mailing Address:

FEI Number: 65-0199766

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MCGARY, LARRY
6703-21ST AVE TR WEST
BRADENTON, FL 34209 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: P () Delete
Name: MCGARY, LARRY
Address: 6703-21ST AVE TR WEST
City-St-Zip: BRADENTON, FL 34209

Title: VP () Delete
Name: GAGE, BARBARA
Address: 6606 23 AVENUE WEST
City-St-Zip: BRADENTON, FL 34209

Title: S () Delete
Name: WILLIS, VERA
Address: 6903 POINTE WEST BLVD.
City-St-Zip: BRADENTON, FL 34209

Title: T () Delete
Name: MCGARY, CAROLE
Address: 6703-21 AVE TR WEST
City-St-Zip: BRADENTON, FL 34209

Title: D () Delete
Name: VANOSTENBRIDGE, DARYL
Address: 6906 POINTE WEST BLVD
City-St-Zip: BRADENTON, FL 34209

Title: D () Delete
Name: STEARNS, LYNDIA
Address: 6802 23 AVENUE WEST
City-St-Zip: BRADENTON, FL 34209

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:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: D (X) Change () Addition
Name: FAULKNER, CHARLES
Address: 6903 23 AVENUE WEST
City-St-Zip: BRADENTON, FL 34209

Title: D (X) Change () Addition
Name: SCHAROLD, BARBARA
Address: 6704 22 AVENUE WEST
City-St-Zip: BRADENTON, FL 34209

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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: LARRY MCGARY

P

02/16/2009

Electronic Signature of Signing Officer or Director

Date