

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 765516

FILED  
Apr 21, 2009  
Secretary of State

**Entity Name:** POINTE PLEASANT HARBOUR CONDOMINIUMS ASSOCIATION, INC.

**Current Principal Place of Business:**

5837 TROUBLE CREEK RD.  
NEW PORT RICHEY, FL 34652 US

**New Principal Place of Business:**

**Current Mailing Address:**

5837 TROUBLE CREEK RD.  
NEW PORT RICHEY, FL 34652 US

**New Mailing Address:**

**FEI Number:** 59-2144704

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

COMMUNITY MANAGEMENT  
5873 TROUBLE CREEK RD.  
NEW PORT RICHEY, FL 34652 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: VD ( ) Delete  
Name: BROWN, TOM  
Address: 4823 EBBTIDE LANE #503  
City-St-Zip: PORT RICHEY, FL 34668

Title: PD ( ) Delete  
Name: DON, DESO  
Address: 4823 EBBTIDE LANE, #203  
City-St-Zip: PORT RICHEY, FL 34668

Title: D ( ) Delete  
Name: OLSON, ED  
Address: 4823 EBBTIDE LANE, #303  
City-St-Zip: PORT RICHEY, FL 34668

Title: SD ( ) Delete  
Name: STETHOPOULAS, HEATHER  
Address: 2693 WESTCHESTER DR N  
City-St-Zip: CLEARWATER, FL 33761

Title: D ( ) Delete  
Name: MCELMURRAY, JAMES  
Address: 276 W. ROVERGLEN DR.  
City-St-Zip: WORTHINGTON, OH 43085

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: VPTD (X) Change ( ) Addition  
Name: BROWN, TOM  
Address: 4823 EBBTIDE LANE #503  
City-St-Zip: PORT RICHEY, FL 34668

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

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

Title: SD (X) Change ( ) Addition  
Name: MCELMURRAY, JAMES  
Address: 276 W RIVERGLEN DRIVE  
City-St-Zip: WORTHINGTON, OH 43085

Title: D (X) Change ( ) Addition  
Name: SMITH, HEATHER  
Address: 2693 WESTCHESTER DRIVE NORTH  
City-St-Zip: CLEARWATER, FL 33761

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: TOM BROWN

VP

04/21/2009

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

\_\_\_\_\_  
Date