

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 768105

FILED
Mar 23, 2009
Secretary of State

Entity Name: CENTRAL FLORIDA PINE HARBOR POINT HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:

1212 PINE HARBOR PT CIR
ORLANDO, FL 32806 US

New Principal Place of Business:

Current Mailing Address:

1212 PINE HARBOR PT CIR
ORLANDO, FL 32806 US

New Mailing Address:

FEI Number: 59-3231123

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HADLEY, JEFFREY L
1212 PINE HARBOR POINT CIRCLE
ORLANDO, FL 32806 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: DP () Delete
Name: METZLER, ROBERT
Address: 1230 PINE HARBOR PT CIR
City-St-Zip: ORLANDO, FL 32806

Title: DS () Delete
Name: SMITH, ANN
Address: 1287 PINE HARBOR PT CIR
City-St-Zip: ORLANDO, FL 32806

Title: TD () Delete
Name: HADLEY, JEFFREY L
Address: 1212 PINE HARBOR POINT CIRCLE
City-St-Zip: ORLANDO, FL 32806

Title: DV () Delete
Name: DAVIS, DENISE
Address: 1279 PINE HARBOR PT CIRCLE
City-St-Zip: ORLANDO, FL 32806

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:

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: JEFFREY L. HADLEY

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03/23/2009

Electronic Signature of Signing Officer or Director

Date