## 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## **DOCUMENT#769215**

FILED May 08, 2009 Secretary of State

Entity Name: SOUTHPOINTE HOMEOWNERS ASSOCIATION, INC.

**Current Principal Place of Business: New Principal Place of Business:** 

% STATE REALTY, INC. 5505 PEMBROKE RD HOLLYWOOD, FL 330218035 US

**New Mailing Address: Current Mailing Address:** 

% STATE REALTY, INC 5505 PEMBROKE ŔD HOLLYWOOD, FL 330218035 US

FEI Number: 59-2316218 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: Name and Address of New Registered Agent:

KEATING, JOHN D STATES REALTY C/O 5505 PEMBROKE ROAD HOLLYWOOD, FL 33021 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:

Electronic Signature of Registered Agent

Date

## **OFFICERS AND DIRECTORS:**

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

(X) Change ( ) Addition () Delete FONTE, JESUS FONTE, JESUS Name: Name: 3626 NW 111 Address: 3626 NW 111 Address:

City-St-Zip: SUNRISE, FL 33351 City-St-Zip: SUNRISE, FL 33351

Title: Title: (X) Change ( ) Addition ( ) Delete CUBBELLOTTI, ROSIE Name: SOMAN, ATHERLY Name:

Address: 3661 NW 111 AVE Address: 3667 NW 111 TERR City-St-Zip: SUNRISE, FL 33351 City-St-Zip: SUNRISE, FL 33351

Title: DV () Delete Title: (X) Change ( ) Addition GILBERT, STEVEN R GILBERT, STEVEN R Name: Name:

3573 NW 111 TERR Address: Address: 3573 NW 111 TERR

City-St-Zip: FORT LAUDERDALE, FL 33351 City-St-Zip: FORT LAUDERDALE, FL 33351

Title: ( ) Delete Title: () Change () Addition

Name: SAWYER, KEVIN Name: Address: 3641 NW 111 AVE Address: City-St-Zip: SUNRISE, FL 33351 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.

Ρ SIGNATURE: STEVE GILBERT 05/08/2009