

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 770587

FILED
Mar 21, 2005
Secretary of State

Entity Name: ROSE POINT HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:

2180 W. S.R. 434
SUITE 5000
LONGWOOD, FL 32779 US

New Principal Place of Business:

Current Mailing Address:

2180 W. S.R. 434
SUITE 5000
LONGWOOD, FL 32779 US

New Mailing Address:

FEI Number: 59-2405987 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

HART, JAMES W
2180 W. S.R. 434
SUITE 5000
LONGWOOD, FL 32779 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: REC () Delete
Name: CRAWFORD, TERRENCE
Address: 2180 W. S.R. 434, SUITE 5000
City-St-Zip: LONGWOOD, FL 32779 US

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: COLEMAN, BETTINA
Address: 4474 GOLDENRAIN CT
City-St-Zip: ORLANDO, FL 32808 US

Title: VPD () Change (X) Addition
Name: DAQUIN, JACQUELIN
Address: 4591 POINT LOOK OUT RD
City-St-Zip: ORLANDO, FL 32808 US

Title: STD () Change (X) Addition
Name: HURLEY, BRENDA
Address: 4469 GOLDENRAIN CT
City-St-Zip: ORLANDO, FL 32808

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: BETTINA COLEMAN

PD

03/21/2005

Electronic Signature of Signing Officer or Director

Date