

# 2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# J68106

FILED  
Feb 04, 2011  
Secretary of State

**Entity Name:** CANAL POINT MAINTENANCE CO.

**Current Principal Place of Business:**

10 HELEN LANE  
FT. MYERS BEACH, FL 339312940 US

**New Principal Place of Business:**

**Current Mailing Address:**

35 NANCY LANE  
FT. MYERS BEACH, FL 33931 US

**New Mailing Address:**

54 EMILY LANE  
FT. MYERS BEACH, FL 33931 US

**FEI Number:** 59-2798743

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

PIERZCHALA, JOHN  
54 EMILY LANE  
FORT MYERS BEACH, FL 33931 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/T  
Name: PIERZCHALA, JOHN MR  
Address: 54 EMILY LANE  
City-St-Zip: FORT MYERS BEACH, FL 33931

Title: VPD  
Name: SKELTON, DONALD MR  
Address: 29 HELEN LANE  
City-St-Zip: FORT MYERS BEACH, FL 33931

Title: SD  
Name: WINTERS, RICHARD MR  
Address: 18 NANCY LANE  
City-St-Zip: FORT MYERS BEACH, FL 33931

Title: D  
Name: NEWPORT, RALPH MR  
Address: 30 NANCY LANE  
City-St-Zip: FORT MYERS BEACH, FL 33931

Title: D  
Name: GABRIELSON, WILMER MR  
Address: 12 HELEN LANE  
City-St-Zip: FORT MYERS BEACH, FL 33931

I hereby 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 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: JOHN PIERZCHALA

P/T

02/04/2011

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

\_\_\_\_\_  
Date