2008 NOT-FOR-PROFIT CORPORATION **ANNUAL REPORT**

Jan 22, 2008 8:00 am **Secretary of State** DOCUMENT # N00000001624 01-22-2008 90048 028 ****61.25 1. Entity Name REGAL POINTE HOMEOWNERS' ASSOCIATION, INC. Principal Place of Business Mailing Address C/O COMMUNITY MGMT PROPR, INC. C/O COMMUNITY MGMT PROPR, INC. 5401 KIRKMAN RD., STE 450 5401 KIRKMAN RD., STE 450 ORLANDO, FL 32819 ORLANDO, FL 32819 2. Principal Place of Business - No P.O. Box # 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 01082008 Chg-NP CR2E037 (12/06) 4. FEI Number 59-3673052 City & State City & State Applied For Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent COMMUNITY MANAGEMENT PROFESSIONALS, INC. Street Address (P.O. Box Number is Not Acceptable) 5401 KIRKMAN RD., STE. 450 ORLANDO FL 32819 Zip Code FL 8. 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE 9. Election Campaign Financing Make check payable to Filing Fee is \$61.25 \$5.00 May Be Trust Fund Contribution. Florida Department of State Due by May 1, 2008 10. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 11. TITLE ☐ Delete TITLE Addition BARNHIll, BARBARA GOO GRAND ROYAL CIRCLE PERSAUD, SHIV NAME NAME STREET ADDRESS 289 REGAL DOWNS CIR. STREET ADORESS WINTER GARJEN, FL 34787 WINTER GARDEN, FL 34787 CITY-ST-ZIP CITY-ST-ZIP SD HIGGINS, ANGELA 318 GRAND ROYAL CIRCLE TITLE Delete TITLE Addition NAME HAGGINS, ANGELA NAME STREET ADDRESS 318 GRAND ROYAL CR STREET ADDRESS WINTER GARDEN, FL 34787 CITY-ST-ZIP WINTER GARDEN, FL 34787 CITY-ST-ZIP **Change** ☐ Addition TITLE ☐ Delete TITLE KRAMMEL, DIANA 253 REGAL DOWN CIR KRAMMEL, DIANA NAME NAME 253 REGAL DOWN CIR STREET ADDRESS STREET ADDRESS WINTER GARDEN FL 34787 CITY-ST-ZIP WINTER GARDEN, FL 34787 CITY-ST-ZIP TITLE Delete TITLE ☐ Change ☐ Addition LOPEZ, EDWIN NAME NAME STREET ADDRESS 531 GRAND ROYAL STREET ADDRESS CITY-ST-ZIP WINTER GARDEN, FL 34787 CITY-ST-ZIP TITLE PD ☐ Deleie TITLE ☐ Change ☐ Addition VISSERS, MERRICK NAME NAME STREET ADDRESS 547 GRAND ROYAL STREET ADDRESS CITY-ST-ZIP WINTER GARDEN, FL 34787 CITY-ST-ZIP TITLE ☐ Delete TITLE Change ☐ Addition NAME NAME

12. Thereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered. 86

STREET ADDRESS

CITY - ST - ZIP

SIGNATURE:

STREET ADDRESS

CITY-ST-ZIP

BARBARA BARN HILL

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