

**2007 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT****FILED**  
**Sep 19, 2007**  
**Secretary of State**

DOCUMENT# N00000006851

**Entity Name:** MASTER ASSOCIATION AT ARROWHEAD POINT, INC.**Current Principal Place of Business:**1645 PINELLAS BAYWAY  
TIERRA VERDE, FL 33715**New Principal Place of Business:****Current Mailing Address:**POB 47068  
SAINT PETERSBURG, FL 33743**New Mailing Address:**5901 SUN BLVD  
SUITE 203  
SAINT PETERSBURG, FL 33743**FEI Number:** 59-3677296**FEI Number Applied For ( )****FEI Number Not Applicable ( )****Certificate of Status Desired ( )****Name and Address of Current Registered Agent:**WELTON, RONALD  
5444 PRK BLVD  
101  
PINELLAS PARK, FL 33781 US**Name and Address of New Registered Agent:**PROFESSIONAL BAYWAY MANAGEMENT  
5901 SUN BLVD.  
203  
ST. PETERSBURG, FL 33715 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: WILLIAM NEWTON

09/19/2007

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: STD ( ) Delete  
Name: IBANEZ, PAUL  
Address: 1645 PINELLAS BAYWAY 134  
City-St-Zip: TIERRA VERDE, FL 33715

Title: VPD ( ) Delete  
Name: OSTROWSKI, RALPH  
Address: 1645 PINELLAS BAYWAY B5  
City-St-Zip: TIERRA VERDE, FL 33715

Title: PD ( ) Delete  
Name: ALBERA, FRED  
Address: 1645 PINELLAS BAYWAY 134  
City-St-Zip: TIERRA VERDE, FL 33715

Title: D ( ) Delete  
Name: CLARK, MELISSA  
Address: 1645 PINELLAS BAYWAY A3  
City-St-Zip: TIERRA VERDE, FL 33715

Title: D ( ) Delete  
Name: ROGERO, DICK  
Address: 1645 PINELLAS BAYWAY A3  
City-St-Zip: TIERRA VERDE, FL 33715

**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:

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: WILLIAM NEWTON

A

09/19/2007

Electronic Signature of Signing Officer or Director

Date