

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N00060

FILED  
Feb 26, 2009  
Secretary of State

Entity Name: PIERPOINTE EAST HOMEOWNERS' ASSOCIATION, INC.

**Current Principal Place of Business:**

1250 HIATUS ROAD  
PEMBROKE PINES, FL 33026

**New Principal Place of Business:**

1941 NW 150TH AVENUE  
PEMBROKE PINES, FL 33028

**Current Mailing Address:**

1941 NW 150TH AVE  
PEMBROKE PINES, FL 33028

**New Mailing Address:**

1941 NW 150TH AVENUE  
PEMBROKE PINES, FL 33028

FEI Number: 59-2355659

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

STRALEY AND OTTO, PA  
2699 STIRLEY RD C-207  
HOLLYWOOD, FL 33312 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: PD ( ) Delete  
Name: MCCRAKCINE, PAM  
Address: 1202 N. HIATUS RD.  
City-St-Zip: PEMBROKE PINES, FL 33026

Title: SD ( ) Delete  
Name: ANATRA, CONNIE  
Address: 1052 HIATUS RD  
City-St-Zip: PEMBROKE PINES, FL 33026

Title: VD ( ) Delete  
Name: MESSANO, ROSEMARY  
Address: 1220 HIATUS RD  
City-St-Zip: PEMBROKE PINES, FL 33026

Title: D ( ) Delete  
Name: BERGMAN, JOAN  
Address: 1086 N. HIATUS RD  
City-St-Zip: PEMBROKE PINES, FL 33025

Title: T (X) Delete  
Name: ROBINSON, LONNIE  
Address: 1056 N. THATTS RD.  
City-St-Zip: PEMBROKE PINES, FL 33025

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: PD (X) Change ( ) Addition  
Name: MCCRAKCINE, PAM  
Address: 1941 NW 150TH AVENUE  
City-St-Zip: PEMBROKE PINES, FL 33028

Title: SD (X) Change ( ) Addition  
Name: ANATRA, CONNIE  
Address: 1941 NW 150TH AVENUE  
City-St-Zip: PEMBROKE PINES, FL 33028

Title: VD (X) Change ( ) Addition  
Name: MESSANO, ROSEMARY  
Address: 1941 NW 150TH AVENUE  
City-St-Zip: PEMBROKE PINES, FL 33028

Title: T (X) Change ( ) Addition  
Name: ROBINSON, LONNIE  
Address: 1941 NW 150TH AVENUE  
City-St-Zip: PEMBROKE PINES, FL 33028

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: PAM MC CRACKINE

PRES

02/26/2009

Electronic Signature of Signing Officer or Director

Date