

2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N00060

FILED
Apr 15, 2011
Secretary of State

Entity Name: PIERPOINTE EAST HOMEOWNERS' ASSOCIATION, INC.

Current Principal Place of Business:

1941 NW 150TH AVENUE
PEMBROKE PINES, FL 33028

New Principal Place of Business:

Current Mailing Address:

1941 NW 150TH AVENUE
PEMBROKE PINES, FL 33028

New Mailing Address:

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
Name: MCCrackine, PAM
Address: 1941 NW 150TH AVENUE
City-St-Zip: PEMBROKE PINES, FL 33028

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

Title: VD
Name: ENGEL, LISA
Address: 1941 NW 150TH AVENUE
City-St-Zip: PEMBROKE PINES, FL 33028

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

Title: D
Name: BLANCO, MICHAEL
Address: 1941 NW 150TH AVENUE
City-St-Zip: PEMBROKE PINES, FL 33028

Title: D
Name: BERGMAN, JOAN
Address: 1941 NW 150TH AVENUE
City-St-Zip: PEMBROKE PINES, FL 33028

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

SIGNATURE: PAM MCCrackine

PD

04/15/2011

Electronic Signature of Signing Officer or Director

Date