

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N00490

FILED
Apr 25, 2007
Secretary of State

Entity Name: BLUE POINT CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

C/O DIANA GURGES, ACCOUNTANT
3400 N. TAMiami TRAIL, STE. 202
NAPLES, FL 34102 US

Current Mailing Address:

C/O DIANA GURGES, ACCOUNTANT
3400 N TAMiami TRAIL, STE. 202
NAPLES, FL 33940 US

New Principal Place of Business:

C/O KEVIN P. GAFFNEY, ACCOUNTANT
3400 N. TAMiami TRAIL, STE. 302
NAPLES, FL 34103 US

New Mailing Address:

C/O KEVIN P. GAFFNEY, ACCOUNTANT
3400 N TAMiami TRAIL, STE. 302
NAPLES, FL 34103 US

FEI Number: 59-1298156

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GURGES, DIANA, ACCOUNTANT
3400 N. TAMiami TRAIL
SUITE 202
NAPLES, FL 34103 US

Name and Address of New Registered Agent:

GAFFNEY, KEVIN P
3400 N. TAMiami TRAIL
SUITE 302
NAPLES, FL 34103 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: KEVIN P. GAFFNEY

04/25/2007

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: D (X) Delete
Name: KRAGH, MATTHEW
Address: 1686 BLUE POINT AVE
City-St-Zip: NAPLES, FL 34102

Title: DT () Delete
Name: SERCL, GEORGE
Address: 1686 BLUE POINT AVE.
City-St-Zip: NAPLES, FL 34102

Title: DVS () Delete
Name: COLGATE, JODI
Address: 1686 BLUE POINT AVE
City-St-Zip: NAPLES, FL 34102

Title: DVP () Delete
Name: OBRIEN, WILLIAM
Address: 1686 BLUE POINT AVE.
City-St-Zip: NAPLES, FL 34102

Title: DP () Delete
Name: CORBETT, DEREK
Address: 1686 BLUEPOINT AVE
City-St-Zip: NAPLES, FL 34102

Title: D (X) Delete
Name: WEBB, BETSY
Address: 1686 BLUE POINT AVE
City-St-Zip: NAPLES, FL 34102

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: S (X) Change () Addition
Name: COLGATE, JODI
Address: 1686 BLUE POINT AVE
City-St-Zip: NAPLES, FL 34102

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: JODI COLGATE

S

04/25/2007

Electronic Signature of Signing Officer or Director

Date