2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 25, 2012
Secretary of State

DOCUMENT# N00490

Entity Name: BLUE POINT CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

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

New Principal Place of Business:

Current Mailing Address:

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

New Mailing Address:

FEI Number: 59-1298156 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

GAFFNEY, KEVIN P
3400 N. TAMIAMI TRAIL
SUITE 302
NAPLES, FL 34103 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: T
Name: SERCL, GEORGE
Address: 1686 BLUE POINT AVE. #5B
City-St-Zip: NAPLES, FL 34102

Title: S
Name: COLGATE, JODI
Address: 1686 BLUE POINT AVE #3B
City-St-Zip: NAPLES, FL 34102

Title: VP
Name: OBRIEN, WILLIAM
Address: 1686 BLUE POINT AVE. #4B
City-St-Zip: NAPLES, FL 34102

Title: P
Name: SIXT, JOHN
Address: 295 WHITFIELD AVE
City-St-Zip: BUFFALO, NY 14220

Title: D
Name: WEBB, ELIZABETH
Address: 1686 BLUEPOINT AVE. #8B
City-St-Zip: NAPLES, FL 34102

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: JODI COLGATE S 04/25/2012
Electronic Signature of Signing Officer or Director Date