

2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01000003086

FILED
Apr 12, 2011
Secretary of State

Entity Name: EGRET POINTE PROPERTY OWNERS' ASSOCIATION, INC.

Current Principal Place of Business:

409 E. COLLEGE AVE
RUSKIN, FL 33570

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 1058
RUSKIN, FL 33575

New Mailing Address:

FEI Number: 59-3720928

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WILSON, LOU ELLEN
409 E. COLLEGE AVE
RUSKIN, FL 33570 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: DP
Name: NORTON, MIKE
Address: 1349 MISTY GREENS DR
City-St-Zip: SUN CITY CENTER, FL 33573

Title: D/S
Name: GROSSKOPF, GEORGE
Address: 1348 MISTY GREENS DR
City-St-Zip: SUN CITY CENTER, FL 33573

Title: D/V/P
Name: SKINNER, ANNE
Address: 1338 MISTY GREENS DR.
City-St-Zip: SUN CITY CENTER, FL 33573

Title: DT
Name: ANDERSON, ERIC
Address: 1337 MISTY GREENS DR.
City-St-Zip: SUN CITY CENTER, FL 33573

Title: D
Name: BROAD, TIM
Address: 1350 MISTY GREENS DRIVE
City-St-Zip: SUN CITY CENTER, FL 35575

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: MIKE NORTON

DP

04/12/2011

Electronic Signature of Signing Officer or Director

Date