2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 13, 2008
Secretary of State

DOCUMENT# N02000002454

Entity Name: WHITCOMB POINT HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:

321-MANATEE LANE
TARPON SPRINGS, FL 34689 US

New Principal Place of Business:

219-MANATEE LANE
TARPON SPRINGS, FL 34689 US

Current Mailing Address:

321-MANATEE LANE
TARPON SPRINGS, FL 34689 US

New Mailing Address:

219-MANATEE LANE
TARPON SPRINGS, FL 34689 US

FEI Number: 04-3665722 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

COX, ROBERT
321-MANATEE LANE
TARPON SPRINGS, FL 34689 US

Name and Address of New Registered Agent:

THOMPSON, KATHLEEN
219-MANATEE LANE
TARPON SPRINGS, FL 34689 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: KATHLEEN THOMPSON 04/13/2008
Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: P ( ) Delete
Name: COTIER, GEOFFREY
Address: 310-MANATEE LANE
City-St-Zip: TARPON SPRINGS, FL 34689

Title: V ( ) Delete
Name: GREEN, DAVID
Address: 202-MANATEE LANE
City-St-Zip: TARPON SPRINGS, FL 34689

Title: ST ( ) Delete
Name: COX, ROBERT
Address: 321-MANATEE LANE
City-St-Zip: TARPON SPRINGS, FL 34689

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: ST (X) Change ( ) Addition
Name: THOMPSON, KATHLEEN
Address: 219-MANATEE LANE
City-St-Zip: TARPON SPRINGS, FL 34689

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: KATHLEEN THOMPSON SEC 04/13/2008
Electronic Signature of Signing Officer or Director Date