

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000006964

FILED
Jun 22, 2009
Secretary of State

Entity Name: GRAND POINTE ESTATES HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:

220 WEST GARDEN STREET
SUITE 605
PENSACOLA, FL 32501

New Principal Place of Business:

Current Mailing Address:

PO BOX 1237
GULF BREEZE, FL 325621237 US

New Mailing Address:

FEI Number: 30-0148522 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

CYR, LEO J
1333 UPLAND CREST CT
GULF BREEZE, FL 32563 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: D () Delete
Name: RILEY, MIKE
Address: 1349 UPLAND CREST CT
City-St-Zip: GULF BREEZE, FL 32563

Title: D () Delete
Name: CYR, LEO
Address: 1333 UPLAND CREST CT
City-St-Zip: GULF BREEZE, FL 32563

Title: D () Delete
Name: PICARDI, JAMES
Address: 1317 UPLAND CREST COURT
City-St-Zip: GULF BREEZE, FL 32563

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: KING, MARK
Address: 2641 DAYTIME COURT
City-St-Zip: GULF BREEZE, FL 32563

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: LEO J. CYR

PRES

06/22/2009

Electronic Signature of Signing Officer or Director

Date