2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Sep 04, 2008
Secretary of State

DOCUMENT# N02000008305

Entity Name: CANAL POINTE HOMEOWNERS' ASSOCIATION, INC.

Current Principal Place of Business:

C/O FREDERICK C. HEIDGERD, ESQ.
HEIDGERD & HUNN,600 W. HILLSBORO BLVD #520
DEERFIELD BEACH, FL 33441

New Principal Place of Business:

Current Mailing Address:

C/O FREDERICK C. HEIDGERD, ESQ.
HEIDGERD & HUNN,600 W. HILLSBORO BLVD #520
DEERFIELD BEACH, FL 33441

New Mailing Address:

FEI Number: 20-8690015 **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:

HEIDGERD, FREDERICK C ESQ
600 W. HILLSBORO BLVD, STE 520
DEERFIELD BEACH, FL 33441 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: PD ( ) Delete
Name: FISHER, LAMAR
Address: 100 W. ATLANTIC BLVD.
City-St-Zip: POMPANO BEACH, FL 33060

Title: D ( ) Delete
Name: MCGINN, KAY
Address: 100 W. ATLANTIC BLVD.
City-St-Zip: POMPANO BEACH, FL 33060

Title: SD ( ) Delete
Name: BRUMMER, GEORGE
Address: 100 W. ATLANTIC BLVD.
City-St-Zip: POMPANO BEACH, FL 33060

Title: D ( ) Delete
Name: BURRIE, CHARLOTTE
Address: 100 W. ATLANTIC BLVD.
City-St-Zip: POMPANO BEACH, FL 33060

Title: D ( ) Delete
Name: HARDIN, REX
Address: 100 W. ATLANTIC BLVD.
City-St-Zip: POMPANO BEACH, FL 33060

Title: D ( ) Delete
Name: LARKINS, PAT
Address: 100 W. ATLANTIC BLVD.
City-St-Zip: POMPANO BEACH, FL 33060

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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: LAMAR FISHER PD 09/04/2008

Electronic Signature of Signing Officer or Director — Date