

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED
Apr 26, 2004
Secretary of State**

DOCUMENT# N03000000066

Entity Name: OAK POINT HOME OWNERS' ASSOCIATION OF PENSACOLA, INC.

Current Principal Place of Business:

1005 NORTH 12TH AVENUE
PENSACOLA, FL 32503

New Principal Place of Business:

Current Mailing Address:

1005 NORTH 12TH AVENUE
PENSACOLA, FL 32503

New Mailing Address:

FEI Number: 03-0501335 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

JESMONTH, RICHARD E
217-A E INTENDENCIA ST
PENSACOLA, FL 32501 US

Name and Address of New Registered Agent:

MCALPIN, BRUCE E
1704 OSCEOLA BLVD
PENSACOLA, FL 32503 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: BRUCE E MCALPIN 04/26/2004
Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: MCALPIN, BRUCE
Address: 1005 NORTH 12 AVE
City-St-Zip: PENSACOLA, FL 32503

Title: D (X) Delete
Name: MCALPIN, FRED
Address: 1704 OSCEOLA BLVD
City-St-Zip: PENSACOLA, FL 32503

Title: D (X) Delete
Name: JESMONTH, RICHARD E
Address: 217-A E INTENDENCIA ST
City-St-Zip: PENSACOLA, FL 32501

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PSTD (X) Change () Addition
Name: MCALPIN, BRUCE
Address: 1704 OSCEOLA BLVD
City-St-Zip: PENSACOLA, FL 32503

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 for the exemption stated in Section 119.07(3)(i), 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: BRUCE MCALPIN OD 04/26/2004
Electronic Signature of Signing Officer or Director Date