2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Mar 21, 2008 8:00 am
Secretary of State
03-04-2008 90012 023 ****61.25

DOCUMENT # N03000000155

1. Entity Name

SUNCOAST POINTE HOMEOWNERS ASSOCIATION, INC.

66004617

Principal Place of Business	Mailing Address
325 SOUTH BLVD TAMPA FL 33606	STERLING MANAGEMENT SVCS 2870 SCHERER DR N. #100 SAINT PETERSBURG FL 33716

1st MOORE CR2E037 (10/07)

2. Principal Place of Business - No P.O. Box #	3. Mailing Address
Sterling Management Services 2870 Scherer Drive N., Suite 100	Suite, Apt. #, etc.
City & State St. Petersburg FL 33716	City & State
Zip / Country	Zip / Country

4. FEI Number 16-1648828 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
COTTERILL, RONALD 1010 N. FLORIDA AVE TAMPA FL 33602	Name Street Address (P.O. Box Number is Not Acceptable) City **FL** Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ 2/22/2008
Signature, typed or printed name of registered agent and title, if applicable. (NOTE: Registered Agent signature required when changing registered agent.) DATE

FILE NOW: FEE IS $61.25
Due By May 1, 2008

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

Make Check Payable to: Florida Department of State

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D HAYDON, ROGERS K JR 15500 ROOSEVELT BLVD STE 303 CLEARWATER FL 33760	☑ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	P GREG FLISS 2729 MINGO DR. LAND O'LAKES, FL. 34638	☐ Change ☑ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D ALLISON, ROBERT 3802A GUNN HWY TAMPA FL 33624	☑ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	V LORA HUTT 2816 MINGO DR. Land O'Lakes, FL. 34638	☐ Change ☑ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D PONTON, LANCE 3802A GUNN HWY TAMPA FL 33624	☑ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	S IDALMIS VEGA 2728. HEATHGATE WAY Land O'Lakes, FL. 34638	☐ Change ☑ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	T JULIA WILLIAMS 17027 ODESSA DR Land O'Lakes, FL. 34638	☐ Change ☑ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D ED LATIF 2722 HEATHGATE Land O' Lakes, FL. 34638	☐ Change ☑ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D ERICA YANUZZELI 3614 FYFIELD CT. Land O'Lakes, FL. 34638	☐ Change ☑ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: _____ 2/21/08 813-222-0577
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

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SUNCOAST POINTE HOA, INC

ATTACHMENT
66004617
#N03000000155

D - VINCENT WAGNER
2707 MINGO DR.
LAND O' LAKES, FL. 34638

ADDITION