

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000001924

FILED
May 08, 2008
Secretary of State

Entity Name: NORTHPOINTE CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

6831 EDGEWATER COMMERCE PKWY
SUITE 1104
ORLANDO, FL 32810

New Principal Place of Business:

Current Mailing Address:

6831 EDGEWATER COMMERCE PKWY
SUITE 1104
ORLANDO, FL 32810

New Mailing Address:

FEI Number: 05-0566280 **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:

Name and Address of New Registered Agent:

MARTINO, JOHN D
6831 EDGEWATER COMMERCE PKWY.
SUITE 1104
ORLANDO, FL 32810 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: _____

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: MCCALLY, JOHN
Address: 6831 EDGEWATER COMMERCE PKWY, STE 1110
City-St-Zip: ORLANDO, FL 32810

Title: TD () Delete
Name: DUDAN, JEFF
Address: 6831 EDGEWATER COMMERCE PKWY, STE. 1101
City-St-Zip: ORLANDO, FL 32810

Title: SD () Delete
Name: MARTINO, JOHN
Address: 6831 EDGEWATER COMMERCE PKWY, STE. 1104
City-St-Zip: ORLANDO, FL 32810

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:

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: JOHN D MARTINO

SD

05/08/2008

Electronic Signature of Signing Officer or Director

Date