

2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000007426

FILED
Feb 17, 2012
Secretary of State

Entity Name: TOMPSON POINT/RESERVE PROPERTY OWNERS ASSOCIATION, INC.

Current Principal Place of Business:

C/O BAYSHORE ASSOC. MANAGEMENT
430 NW LAKE WHITNEY PLACE
PORT SAINT LUCIE, FL 34986

New Principal Place of Business:

Current Mailing Address:

C/O BAYSHORE ASSOC. MANAGEMENT
430 NW LAKE WHITNEY PLACE
PORT SAINT LUCIE, FL 34986

New Mailing Address:

FEI Number: 57-1184792

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

C/O BAYSHORE ASSOCIATION MANAGEMENT
430 NW LAKE WHITNEY PLACE
PORT SAINT LUCIE, FL 34986 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: DP
Name: ZAHARAKO, JAMES
Address: 8604 TOMPSON POINT RD
City-St-Zip: PORT SAINT LUCIE, FL 34986

Title: DVS
Name: MICHALOPOULOS, CHRIS
Address: 8710 TOMPSON POINT ROAD
City-St-Zip: PORT ST LUCIE, FL 34986

Title: DVT
Name: SCHIFILLITI, SALVATORE
Address: 8700 TOMPSON POINT ROAD
City-St-Zip: PORT SAINT LUCIE, FL 34986

I hereby 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 all other like empowered.

SIGNATURE: DONNA MARAVEL

CAM

02/17/2012

Electronic Signature of Signing Officer or Director

Date