



2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 24, 2008 8:00 am
Secretary of State

03-24-2008 90067 020 ****61.25

DOCUMENT # N03000009893					
1. Entity Name SOUTH POINTE HOMEOWNERS ASSOCIATION OF STUART, INC.					
Principal Place of Business SE MURRAY COVE CI STUART, FL 34997		Mailing Address 969 S FEDERAL HWY SUITE 401 STUART, FL 34994			
2. Principal Place of Business - No P.O. Box #		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State		02212008 Chg-NP CR2E037 (12/06)	
Zip		Country		4. FEI Number 25-1914267	
				Applied For Not Applicable	
				5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent			7. Name and Address of New Registered Agent		
SIGNATURE PROPERTY MGMT 969 S FEDERAL HWY STE 401 STUART, FL 34994			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 _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE</small>					
Filing Fee is \$61.25 Due by May 1, 2008		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>		\$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	PD	<input checked="" type="checkbox"/> Delete	TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	SALT, SHIRLEY		NAME		
STREET ADDRESS	4475 SE MURRAY COVE CIR		STREET ADDRESS		
CITY-ST-ZIP	STUART, FL 34997		CITY-ST-ZIP		
TITLE	VP	<input type="checkbox"/> Delete	TITLE	PD	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	PRUETTE, COURTNEY		NAME		
STREET ADDRESS	4563 SE MURRAY COVE CIR		STREET ADDRESS		
CITY-ST-ZIP	STUART, FL 34997		CITY-ST-ZIP		
TITLE	SD	<input checked="" type="checkbox"/> Delete	TITLE	TD	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	DEMANN, MARY		NAME	RAUCCI, JOHN	
STREET ADDRESS	4588 SE MURRAY COVE CIR		STREET ADDRESS	4572 SE MURRAY COVE CIRCLE	
CITY-ST-ZIP	STUART, FL 34997		CITY-ST-ZIP	STUART, FL 34997	
TITLE	D	<input checked="" type="checkbox"/> Delete	TITLE	SD	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	O'BRIEN, MATT		NAME	LEDDY, SEAN	
STREET ADDRESS	4492 SE MURRAY COVE CIR		STREET ADDRESS	4568 SE MURRAY COVE CIRCLE	
CITY-ST-ZIP	STUART, FL 34997		CITY-ST-ZIP	STUART, FL 34997	
TITLE	D	<input checked="" type="checkbox"/> Delete	TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	UELTSCHI, ROBERT		NAME		
STREET ADDRESS	4536 SE MURRAY COVE CIR		STREET ADDRESS		
CITY-ST-ZIP	STUART, FL 34997		CITY-ST-ZIP		
TITLE	D	<input checked="" type="checkbox"/> Delete	TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	DENEALT, YVES		NAME		
STREET ADDRESS	4528 SE MURRAY COVE CIR		STREET ADDRESS		
CITY-ST-ZIP	STUART, FL 34997		CITY-ST-ZIP		
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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: 			Date: <u>March 21, 2008</u>		
<small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>			<small>Date Daytime Phone #</small>		