

# **2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N03056

**FILED**  
**Apr 12, 2011**  
**Secretary of State**

**Entity Name:** NORTH POINTE VILLAS COMMUNITY ASSOCIATION, INC.

**Current Principal Place of Business:**

502 NW 16TH AVENUE  
GAINESVILLE, FL 32601 US

**New Principal Place of Business:**

**Current Mailing Address:**

502 NW 16TH AVENUE  
GAINESVILLE, FL 32601 US

**New Mailing Address:**

**FEI Number:** 59-2408722

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

WARREN, MICHAEL E  
502 NW 16TH AVENUE  
GAINESVILLE, FL 32601 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: P  
Name: RUTENBURG, BARRY  
Address: P.O. BOX 358080  
City-St-Zip: GAINESVILLE, FL 32635

Title: VP  
Name: SCHMIDT, NICK  
Address: 1605 NW 25TH WAY  
City-St-Zip: GAINESVILLE, FL 32605

Title: S  
Name: WARREN, MICHAEL  
Address: 502 NW 16TH AVE  
City-St-Zip: GAINESVILLE, FL 32601

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: MICHAEL E. WARREN

RA

04/12/2011

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date