

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000002729

FILED  
Apr 21, 2009  
Secretary of State

**Entity Name:** POINTE WEST NORTH VILLAGE TOWNHOUSE ASSOCIATION, INC.

**Current Principal Place of Business:**

9102 S PARK CENTER LOOP  
STE 200  
ORLANDO, FL 32819

**New Principal Place of Business:**

1999 POINTE WEST DR.  
VERO BEACH, FL 32966

**Current Mailing Address:**

9102 S PARK CENTER LOOP  
STE 200  
ORLANDO, FL 32819

**New Mailing Address:**

100 VISTA ROYALE BLVD  
VERO BEACH, FL 32962

FEI Number: 20-3376620

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

VISTA PROPERTIES  
100 VISTA ROYALE BLVD  
VERO BEACH, FL 32962 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 ( ) Delete  
Name: DIAZ, ROBERT  
Address: POINTE WESTWAY  
City-St-Zip: VERO BEACH, FL 32966

Title: S ( ) Delete  
Name: CORLEY, MARNI  
Address: 1656 T. WESTWAY  
City-St-Zip: VERO BEACH, FL 32966

Title: T ( ) Delete  
Name: MILLS, KAREN  
Address: 1753 POINTE WESTWAY  
City-St-Zip: VERO BEACH, FL 32966

Title: VP ( ) Delete  
Name: BARRETT, EDWINA  
Address: 1612 POINTE WESTWAY  
City-St-Zip: VERO BEACH, FL 32966

Title: D (X) Delete  
Name: GAYO, ROSE  
Address: 1769 POINTE WESTWAY  
City-St-Zip: VERO BEACH, FL 32966

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: P (X) Change ( ) Addition  
Name: DIAZ, ROBERT  
Address: 1838 POINTE WEST WAY  
City-St-Zip: VERO BEACH, FL 32966

Title: S (X) Change ( ) Addition  
Name: CORLEY, MARNI  
Address: 1656 POINTE WEST WAY  
City-St-Zip: VERO BEACH, FL 32966

Title: T (X) Change ( ) Addition  
Name: MILLS, KAREN  
Address: 1753 POINTE WEST WAY  
City-St-Zip: VERO BEACH, FL 32966

Title: D (X) Change ( ) Addition  
Name: SURGEONER, PEGGY  
Address: 1637 POINTE WEST WAY  
City-St-Zip: VERO BEACH, FL 32966

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: STEVE SCHNITZER

CAM

04/21/2009

Electronic Signature of Signing Officer or Director

Date